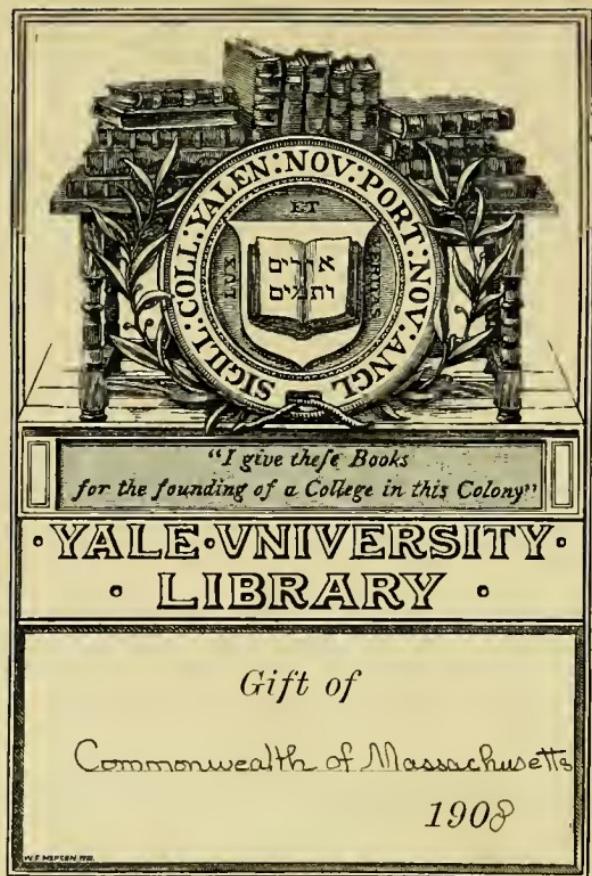


NINTH ANNUAL REPORT
OF THE
STATE BOARD OF INSANITY

1907



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NINTH ANNUAL REPORT

OF THE

STATE BOARD OF INSANITY

OF THE

Commonwealth of Massachusetts,

FOR THE

YEAR ENDING NOVEMBER 30, 1907.

With compliments of

The State Board of Insanity.

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1908.



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Commonwealth of Massachusetts.

STATE BOARD OF INSANITY.

To His Excellency the Governor and the Honorable Council.

The State Board of Insanity respectfully submits its ninth annual report, for the year ending Sept. 30, 1907, relative to general matters, and for the fiscal year ending Nov. 30, 1907, relative to financial matters.

The Board's relation to the institutions and persons under its supervision is largely advisory. It has the right of investigation and recommendation. It seeks to know by its own observations and through inspection by its agents what is being done in general management and in treatment of patients. Uniformity and efficiency are promoted by gathering information of these matters, arranging it in comparative form, and making it available to each institution. Such knowledge of each other's acts and methods leads to special inquiries between them, and the gradual introduction in all of the best, as demonstrated in the experience of any one of them.

It has no direct control over local administration and internal regulations of institutions. Its direct powers relate to general relations between institutions, the classification and transfer of patients between them, discharge on appeal, investigation as to claims for support in institutions, collections for support if private funds are available for the purpose, and deportation out of the State of those who have such claims elsewhere. Family care of the harmless insane is under the control of the Board.

THE SPECIAL CLASSES UNDER SUPERVISION

are the insane, the feeble-minded, the epileptic, and, in part, the inebriate. Their location and number Oct. 1, 1907, are shown in the following table:—

LOCATION.	Insane.	Feeble-minded.	Epileptic (Sane).	Inebriate.	Total.	Voluntary Mental (Not Insane).
Worcester Insane Hospital, . . .	1,153	—	—	7	1,160	
Taunton Insane Hospital,	910	—	—	4	914	
Northampton State Hospital, . . .	725	—	—	—	725	1
Danvers Insane Hospital,	1,251	—	—	3	1,254	1
Westborough Insane Hospital, . . .	869	—	1	1	871	13
Boston Insane Hospital,	760	—	—	—	760	
Insane Wards, State Hospital, . . .	612	—	—	—	612	
Worcester Insane Asylum,	975	—	—	—	975	
Medfield Insane Asylum,	1,449	—	—	—	1,449	
State Colony for the Insane, . . .	462	—	—	—	462	
Massachusetts Hospital for Epileptics,	291	—	279	—	570	
Asylum for Insane Criminals, . . .	567	—	—	—	567	
Foxborough State Hospital,	178	—	—	90	268	
Family care,	275	—	—	—	275	—
McLean Hospital,	205	—	—	—	205	—
Eighteen private institutions for the insane.	86	—	1	2	89	12
Massachusetts School for the Feeble-minded.	—	1,218	—	—	1,218	—
Wrentham State School,	—	10	—	—	10	
Hospital Cottages for Children, . . .	—	17	88	—	105	
Elm Hill, Private Home and School for the Feeble-minded.	—	60	—	—	60	
Almshouses,	—	186	—	—	186	
Total under care,	10,768	1,491	369	107	12,735	27
Viz.:—						
Public care,	10,477	1,431	368	105	12,381	15
Institutions,	10,202	1,245	368	105	11,920	15
Family care,	275	—	—	—	275	
Almshouses,	—	186	—	—	186	
Private care,	291	60	1	2	354	12
McLean Hospital,	205	—	—	—	205	
Nineteen institutions,	86	60	1	2	149	12

THE WHOLE NUMBER OF SUCH PERSONS

under care Oct. 1, 1907, was 12,735, being 1 such person to every 244 of the estimated population of the State. Of this number, 10,768 were insane, 1,491 feeble-minded, 369 epileptic and 107 inebriates.

The increase of all such persons under care was 478 for the year.

The whole number of such persons under public care was 12,381; under private care, 354.

The whole number of such persons in public institutions was 11,920; their increase for the year, 467; their average annual increase for five previous years, 384.

The history of the past in this State and elsewhere shows that these classes increase in accumulation in public institutions. The tendency is toward a progressively higher ratio of increase. The present rate of increase in Massachusetts is not less than the increase for last year.

Hence the present annual requirement for additional public provision for such classes is about 500 beds.

THE WHOLE NUMBER OF THE INSANE

under care Oct. 1, 1907, was 10,768, being 1 insane person to every 289 of the estimated population of the State. In addition, there were 688 unrecovered insane who were temporarily absent from institutions, and a considerable number of others in the community who had previously been discharged or had never appeared in institutions for the insane.

The insane appear under public care in institutions and family care, and under private care in private institutions. Their number and increase in these locations for the year, the previous five years and the previous ten years are shown as follows:—

	NUMBER OCT. 1, 1907.			INCREASE OVER PREVIOUS YEARS.						Average Increase, Five Years.	Average Increase, Ten Years.
	Males.	Females.	Totals.	1907.	1906.	1905.	1904.	1903.	1902.		
Public institutions, . . .	5,065	5,137	10,202	376	172	174 ¹	300 ¹	332	468	289	339
Family care, . . .	13	262	275	10 ²	32	40	54	35	7	34	16
Total public, . . .	5,078	5,399	10,477	366	204	214	354	367	475	323	355
Private institutions, . . .	115	176	291	31	15	3	8	15 ²	9	4	4
Total public and private,	5,193	5,575	10,768	397	219	217	362	352	484	327	359

¹ Exclusive of transfers from almshouses.

² Decrease.

INCREASE OF THE INSANE

under care for the year was 397, compared with 219 the previous year, 327, the average annual increase for the previous five years, and 359 the previous ten years.

It is to be noted that the increase this year is a little above the average for the last ten years.

The number of non-resident insane was 62, compared with 56 the previous year, 56, the average number the previous five years. Of these, 53 were patients in private institutions, 9, private patients in State hospitals.

It is the policy of the State not to receive non-residents even as private patients unless their friends are resident in Massachusetts and have just claims for such service.

THE INCREASE OF THE INSANE UNDER PUBLIC CARE

was 366, compared with 204 the previous year, 323, the average annual increase for the previous five years, and 355 the previous ten years.

THE INCREASE OF THE INSANE UNDER PRIVATE CARE

was 31, compared with 15 the previous year, 4, the average annual increase for the previous five years, and 4 the previous ten years.

The increase under private care is due largely to the occupancy of the new Codman House at McLean Hospital.

Non-residents under private care increased only from 50 to 53 during the year, so that the increase is made up of residents of the State.

In addition to the insane, there were in private institutions 81 other patients, compared with 95 the previous year. Of these, 12 were sane voluntary mental patients and 69 voluntary non-mental patients. None of these classes were in the McLean Hospital, although 34.63 per cent. of its patients were under the voluntary relation without commitment as insane.

THE DECREASE OF THE INSANE IN FAMILY CARE

was 10, compared with an increase of 32 the previous year, 34, the average annual increase for the previous five years, and 16 the previous ten years. Such falling off in family care activities was due to change in the medical directorship, whereby the inexperience of the new director put him at a disadvantage in keeping up the standard established by his experienced and efficient predecessor.

THE INCREASE OF THE INSANE IN PUBLIC INSTITUTIONS

was 376, compared with 172 the previous year, 289, the average annual increase for the previous five years, and 339 the previous ten years.

Although such increase is more than double the average for the two previous years, it rises only 37 above the average for such ten-year period.

The average annual increase in accumulation of the insane in public institutions during such ten-year period was 339, which may be accepted as the minimum normal rate of increase for the present.

The State should make each year additional public provision for 350 insane patients on the average, if the evils of over-crowding are to be avoided.

THE INFLOW TO PUBLIC INSTITUTIONS

accounts for the increase in accumulation of the insane this year.

All admissions, inclusive of 527 nominal admissions, were 4,161 this year, an increase of 552, compared with a decrease of 116 the previous year.

All persons actually admitted during the year were 2,901, an increase of 328, compared with a decrease of 212 the previous year.

THE OUTFLOW FROM PUBLIC INSTITUTIONS

was relatively greater than the previous year, and tended to diminish the accumulation of inmates.

All dismissals, inclusive of 527 nominal dismissals, were

3,785 this year, an increase of 348, compared with 97 the previous year.

All persons actually dismissed during the year were 2,522.

There were 1,118 deaths, an increase of 161; recoveries, 349, an increase of 53; dismissals to family care, 67, a decrease of 26; to institutions, 640, a decrease of 62; to the United States immigration service, 60, an increase of 17; to the State Board, 115, a decrease of 14; escapes, 62, an increase of 9; not insane discharges, 9, a decrease of 12.

Such dismissals total 2,420, an increase of 126, compared with a decrease of 38 the previous year. They may be termed compulsory dismissals inasmuch as the friends and the hospital officials do not control their release.

In addition, there were 1,365 voluntary dismissals at the request of friends or on the advice of the hospital physicians. Their increase was 222, compared with 135 the previous year.

The voluntary dismissal rate this year was 1.35 per cent. more than the previous year.

COMMITMENTS OF THE INSANE,

inclusive of all voluntary admissions, to public institutions and McLean Hospital were 3,022, compared with 2,670 the previous year, and 2,770, the average the previous five years. The increase this year was 352, compared with a decrease of 242 the previous year, and 24, the average increase the previous five years.

Such commitments represent the frequency of admission from the community and their relative increase confirms the claim that this year's increase in accumulation of the insane in public institutions is due to more rapid inflow, not to obstructed outflow.

They comprise court commitments as insane, insane voluntary admissions and sane voluntary mental admissions.

Court commitments as insane were 2,866, compared with 2,545 the previous year, and 2,667, the average the previous five years. The increase was 321, against a decrease of 275 the previous year, and 18, the average increase the previous five years.

Insane voluntary admissions were 131, compared with 95 the

previous year. Public institutions received 52 such patients, of whom 6, or 11.54 per cent., required subsequent commitment. McLean Hospital received 98 such patients, of whom 1, or 1.02 per cent., required subsequent commitment.

Sane voluntary admissions were 25, compared with 30 the previous year. Public institutions received 19 such patients, McLean Hospital 6. None required subsequent commitment.

ALL VOLUNTARY ADMISSIONS

were 156, compared with 125 the previous year, and 105, the average the previous five years. The increase was 33, against a decrease of 8 the previous year, and 6, the average increase the previous five years. Public institutions received 52 such patients, compared with 61 the previous year, and 40, the average the previous five years. McLean Hospital received 104 such patients, compared with 64 the previous year, and 66, the average the previous five years.

It thus appears that the increase of voluntary patients was in McLean Hospital.

EMERGENCY COMMITMENTS

numbered 76, an increase of 28, against a decrease of 33 the previous year, and 3, the average the previous five years. Public institutions received 66; McLean Hospital, 10; 74 were duly committed; 1 became a voluntary patient; and 1 was discharged within the five days' limit.

FIRST CASES OF INSANITY

appeared in public institutions and McLean Hospital to the number of 2,414, compared with 2,077 the previous year, and 2,118, the average the previous five years. The increase was 337, against a decrease of 131 the previous year, and 30, the average increase the previous five years.

80.41 per cent. of all insane commitments, inclusive of insane voluntary patients, to these institutions appeared for the first time in any institution for the insane.

One insane person came under care for the first time from every 1,291 of the estimated population of the State, compared

with 1,473 the previous year, and 1,391, the average from 1900 to 1905.

The estimated increase in the population of the State for the year is 56,596; hence the growth of population accounts for an increase of 44, or 13.05 per cent., of the increase of first cases of insanity appearing this year.

THE NATIVITY

of such first cases of insanity does not differ materially from the percentages of the previous year. Exclusive of 16, or .66 per cent., whose birthplaces were unknown, 900, or 37.53 per cent., were born in Massachusetts; 1,164, or 48.54 per cent., in New England; 1,308, or 54.55 per cent., in United States; 1,090, or 45.45 per cent., in foreign countries.

THEIR PARENTAGE

also corresponds substantially with the percentages of previous years: Exclusive of 151, or 6.26 per cent., whose birthplaces were unknown, 404, or 17.85 per cent., of the mothers were born in Massachusetts; 601, or 26.56 per cent., in New England; 776, or 34.29 per cent., in United States; 1,487, or 65.71 per cent., in foreign countries.

Exclusive of 144, or 5.96 per cent., whose birthplaces were unknown, 397, or 17.49 per cent., of the fathers were born in Massachusetts; 659, or 29.03 per cent., in New England; 756, or 33.28 per cent., in United States; 1,514, or 66.70 per cent., in foreign countries.

THEIR AGES

vary slightly from the averages of previous years. The age of 60 or more had been reached by 501, or 20.89 per cent., when admitted for hospital treatment; by 391, or 17.89 per cent., when insanity began. The mean age was 43.23 years on admission; 40.92 years at the onset of mental disease.

THE LOCALITIES

where they resided at the time of commitment and where in the main insanity developed show that country districts furnish relatively fewer cases of insanity than the more populous cen-

ters. The cities and towns of over 10,000 inhabitants comprise 75.08 per cent. of the total population of the State, and country districts only 24.92 per cent.; whereas 1,894, or 78.46 per cent., of the commitments were made from the former, and 520, or 21.54 per cent., from the latter.

THE CAUSES OF INSANITY

assigned by the physicians of the hospital were physical in 1,537, or 63.67 per cent.; mental in 139, or 5.76 per cent.; unknown in 736, or 30.49 per cent.; and not insane in 0.08 per cent.

Congenital causes were assigned in 5.47 per cent.; heredity alone in 5.26 per cent., with other causes, 14.13 per cent., making heredity a causative factor in 19.39 per cent.; alcoholic intemperance alone in 16.65 per cent., with other causes, 5.35 per cent., making alcohol a causative factor in 22 per cent.; senility in 13.79 per cent.; coarse brain lesions in 5.30 per cent.; syphilis in 3.19 per cent. These six causes were operative in 68.48 per cent. of this year's first cases of insanity.

THE CURABILITY OF MENTAL DISEASE

in this year's first cases of insanity is greater than last year, but somewhat less than the average for the last three years.

The mental disease was classed as curable (Group A, Table 1) in 565, or 23.41 per cent. of first cases, compared with 20.88 per cent. the previous year, and 25.71 per cent., the average for the last three years. The outcome in 1,685 such cases indicates an expectation of recovery in 1 out of 2.18 cases.

The mental disease was classed as generally incurable (Group B, Table 1) in 886, or 36.70 per cent. The outcome in 2,362 such cases indicates an expectation of recovery in 1 out of 32.36 cases.

The mental disease was classed as incurable (Group C, Table 1) in 887, or 36.74 per cent. The outcome in 2,435 such cases indicates an expectation of recovery in 1 out of 2,435 cases.

THE DURATION OF MENTAL DISEASE

previous to hospital treatment was less than three months in 858, or 39.80 per cent., of first cases; less than six months in 1,079, or 50.05 per cent.; less than one year in 1,301, or 60.34 per cent.; one year or more in 855, or 39.66 per cent.

The significance of such previous duration of mental disease is evident from the fact that out of 773 first recoveries, 74.39 per cent. had such previous duration of mental disease less than three months; 85.12 per cent. less than six months; 92.24 per cent. less than one year; and only 7.76 per cent. one year or more; while the whole duration of insanity was less than three months in 28 per cent.; less than six months in 54 per cent.; less than one year in 78 per cent.; and one year or more in only 22 per cent.

CERTAIN FORMS OF MENTAL DISEASE

occur with great frequency; manic depressive insanity in 11.60 per cent. of this year's first cases of insanity and in 49.66 per cent. of curable forms of mental disease (Table 1); acute alcoholic insanity in 7.91 per cent. of first cases and in 33.81 per cent. of curable forms. These two forms comprised 19.51 per cent. of first cases, compared with 17.41 per cent. the previous year, and 19.12 per cent., the average the last three years. They comprised 83.37 per cent. of curable forms of mental disease, compared with 83.37 per cent. the previous year, and 80.90 per cent., the average the last three years. They furnished 71.75 per cent. of first recoveries, compared with 76.83 per cent. the previous year, and 75.39 per cent., the average the last three years.

In the incurable and generally incurable groups, dementia praecox occurred in 21.71 per cent. of first cases; chronic alcoholic insanity in 5.55 per cent.; imbecility in 3.60 per cent.; senile insanity in 14.37 per cent.; epileptic insanity in 4.43 per cent.; general paralysis in 9.24 per cent.; coarse brain lesions in 5.05 per cent. These seven practically incurable forms comprised 63.95 per cent. of first cases and furnished only 7.06 per cent. of first recoveries.

These nine forms of disease comprised 83.46 per cent. of this year's first cases of insanity, compared with 85.86 the previous year, and 83.66 per cent., the average the last three years.

RESULTS OF MENTAL DISEASE

are shown in the condition of patients on discharge: 391 recovered; 276 were capable of self-support; 439 were improved; and 313 not improved.

THE RECOVERY RATE

for the whole State was 13.22 per cent. of commitments, compared with 13.10 per cent. the previous year, and 14.92 per cent., the average the last five years.

The percentages of recoveries in public institutions and McLean Hospital were:—

Of commitments (inclusive of

insane voluntary), . . . 13.02; previous five years' average, 15.15

Of whole number of persons, . 2.99; previous five years' average, 3.60

Of daily average number, . . 3.82; previous five years' average, 4.69

There were 269 recoveries of first cases of insanity, being 11.14 per cent. of such, compared with 11.94 per cent. the previous year, and with 13.70, the previous five years' average.

There were discharged,

CAPABLE OF SELF-SUPPORT,

276, or 9.19 per cent. of commitments, compared with 7.92 per cent. the previous year.

THE RESTORATION OF THE INSANE

to self-support in the community includes both the recovered and those discharged capable of self-support. Together they numbered 667 this year.

The percentages of both these classes in public institutions and McLean Hospital were:—

Of commitments (inclusive of in-

sane voluntary), 22.21; two years' average, 21.39

Of whole number of persons, . . . 5.09; two years' average, 4.72

Of daily average number, 6.52; two years' average, 5.99

THE DEATH RATE OF THE INSANE

during the year was 84.9 per thousand of the whole number of persons treated, compared with 77 the previous year, and 80.5, the average the last five years.

The percentages of deaths in public institutions and McLean Hospital were:—

Of whole number of persons, .	8.69; previous five years' average, 7.85
Of daily average number, .	11.12; previous five years' average, 10.21
Of discharges and deaths, .	44.51; previous five years' average, 38.41

Curable mental disease was present in 7.64 per cent. of persons who died, compared with 8.32 the previous year.

The percentage of deaths occurring within the first three months of hospital residence was 29.68, against 28.52 in 1906, 30.2 in 1905.

Senile insanity was present in 26.36 per cent., general paralysis in 17.49 per cent., coarse brain lesions in 9.05 per cent.

These incurable brain conditions amounted to 52.90 per cent., compared with 53.69 per cent. the previous year.

Tuberculosis was present in 13.44 per cent., compared with 15.19 per cent. the previous year.

Pneumonia (lobar, broncho and hypostatic) was present in 16.96 per cent., organic disease of the heart in 11.25 per cent., organic disease of the kidneys in 4.39 per cent., malignant tumors in 2.37 per cent.

The increase in death rate seems to be due to a greater percentage of cases of senile insanity and organic disease of the kidneys.

It is to be noted that curable mental disease was present in .68 per cent. less of deaths than the previous year, and 1.58 per cent. less than the average for the last three years.

The statistical data on which the foregoing statements and conclusions are based are found in the following tables:—

TABLE 1.—*Relative to First Cases of Insanity in Public Institutions and McLean Hospital.*

INSTITUTIONS.	INSANE COMMITMENTS.		FIRST CASES OF INSANITY—PERCENTAGES.					
	All.	First to Any Hospital.	PERCENTAGE OF FIRST CASES OF INSANITY.		PATIENTS.		NATIVITY.	
			1907.	Average Three Years, 1905-1907.	Massachusetts.	Native.	MOTHERS NATIVE.	FATHERS NATIVE.
Worcester Hospital,	.	517	411	79.50	79.49	34.31	34.72	50.25
Taunton Hospital,	.	441	359	81.41	77.65	31.81	32.87	44.99
Northampton Hospital,	.	293	242	82.59	78.51	39.67	41.28	56.20
Danvers Hospital,	.	586	470	80.19	77.65	34.47	38.06	50.21
Westborough Hospital,	.	404	305	75.49	76.44	42.95	42.76	64.26
Boston Insane Hospital,	.	353	284	80.45	81.33	45.07	41.50	57.75
Insane wards, State Hospital,	.	94	82	87.23	90.28	20.73	22.76	37.80
Asylum for Insane Criminals,	.	97	88	90.72	88.69	25.29	28.16	50.57
Other public institutions,	.	50	45	90.00	59.87	67.44	53.73	81.40
Totals and averages, public,		2,835	2,286	80.63	78.86	36.83	37.49	53.04
McLean Hospital,	.	167	128	76.65	72.06	50.00	47.91	81.25
Totals and averages, public and McLean,	.	3,002	2,414	80.41	78.55	37.53	37.93	54.45

TABLE 1.—*Relative to First Cases of Insanity in Public Institutions and McLean Hospital—Continued.*

INSTITUTIONS.	FIRST CASES OF INSANITY—PERCENTAGES—CON.		AGE.	
	COMMITTED FROM		AVERAGE AGE.	
	CITIES AND TOWNS OVER 10,000, 75 PER CENT. STATE POPULATION.	COUNTRY DISTRICTS, 25 PER CENT. STATE POPULATION.	1907.	Average Three Years, 1905-1907.
	1907. Average Three Years, 1905-1907.	1907. Average Three Years, 1905-1907.	1907. Average Three Years, 1905-1907.	1907. Average Three Years, 1905-1907.
Worcester Hospital,	• • • • •	79.08	78.50	21.50
Taunton Hospital,	• • • • •	72.14	70.97	27.86
Northampton Hospital,	• • • • •	68.60	74.22	31.40
Danvers Hospital,	• • • • •	83.62	74.89	16.38
Westborough Hospital,	• • • • •	72.79	71.21	27.21
Boston Insane Hospital,	• • • • •	96.48	98.32	3.52
Insane wards, State Hospital,	• • • • •	86.59	84.66	13.41
Asylum for Insane Criminals,	• • • • •	75.00	75.00	25.00
Other public institutions,	• • • • •	44.44	59.72	55.66
Totals and averages, public,	• • • • •	78.57	77.66	21.43
McLean Hospital,	• • • • •	76.56	75.04	23.44
Totals and averages, public and McLean,	• • • • •	78.46	77.54	21.64

TABLE 1.—*Relative to First Cases of Insanity in Public Institutions and McLean Hospital—Continued.*

INSTITUTIONS.	FIRST CASES OF INSANITY—PERCENTAGES—Con.					
	DURATION PRIOR TO COMMITMENT.			UNDER 3 MONTHS.		
	1 YEAR OR MORE.		Average Three Years, 1905-1907.	UNDER 1 YEAR.		Average Three Years, 1905-1907.
	1907.	Average Three Years, 1905-1907.		1907.	1907.	Average Three Years, 1905-1907.
Worcester Hospital,	.	.	.	38.54	39.72	61.46
Taunton Hospital,	.	.	.	38.49	43.12	61.51
Northampton Hospital,	.	.	.	47.92	52.95	52.08
Danvers Hospital,	.	.	.	43.34	48.36	56.66
Westborough Hospital,	.	.	.	39.30	35.52	60.70
Boston Insane Hospital,	.	.	.	35.57	41.58	64.43
Insane wards, State Hospital,	.	.	.	48.21	56.18	51.79
Asylum for Insane Criminals,	.	.	.	41.18	41.28	58.82
Other public institutions,	.	.	.	—	5.13	100.00
Totals and averages, public,	.	.	.	39.94	43.26	60.06
McLean Hospital,	.	.	.	36.16	38.67	64.84
Totals and averages, public and McLean,	.	.	.	39.66	43.01	60.34
						56.99
						50.05
						46.92
						39.80
						36.18

TABLE I.—Relative to First Cases of Insanity in Public Institutions and *McLean Hospital*—Continued.

INSTITUTIONS.	FIRST CASES OF INSANITY—PERCENTAGES—Conn.					
	CAUSES ASSIGNED BY HOSPITAL PHYSICIANS.			SENILITY.		
	CONGENITAL.	HEREDITY.	TOTAL HEREDITY.	1907.	Average Three Years, 1905-1907.	Average Three Years, 1905-1907.
Worcester Hospital,	8.75	6.32	11.19	11.53	8.76	10.22
Taunton Hospital,	2.23	3.98	10.31	12.39	3.90	6.75
Northampton Hospital,	14.88	14.11	14.88	14.76	7.85	12.10
Danvers Hospital,	4.68	3.84	—	10.07	27.45	21.38
Westborough Hospital,	2.95	3.24	2.62	5.70	9.84	9.43
Boston Insane Hospital,	2.11	2.88	—	—	13.73	10.68
Insane wards, State Hospital,	12.19	14.70	—	—	12.19	17.58
Asylum for Insane Criminals,	5.68	9.56	—	6.02	13.64	13.12
Other public institutions,	—	—	—	—	17.78	30.63
Totals and averages, public,	5.77	5.85	5.56	8.64	12.39	18.56
McLean Hospital,	—	—	—	—	34.38	41.75
Totals and averages, public and McLean,	5.47	5.61	5.26	8.30	14.13	13.60
				19.39	21.90	13.79
						11.96
						15.42
						3.24

TABLE I.—*Relative to First Cases of Insanity in Public Institutions and McLean Hospital—Continued.*

INSTITUTIONS.	FIRST CASES OF INSANITY—PERCENTAGES—Con.					
	CAUSES ASSIGNED BY HOSPITAL PHYSICIANS—Con.			SYPHILIS,		
	COARSE BRAIN LESIONS.	ALCOHOLIC INTEMPERANCE.	ALCOHOLIC INTEMPERANCE AND OTHER CAUSES.	TOTAL ALCOHOLIC INTEMPERANCE.	1907.	Average Three Years, 1905-1907.
1907.	Average Three Years, 1905-1907.	1907.	Average Three Years, 1905-1907.	1907.	Average Three Years, 1905-1907.	1907.
Worcester Hospital, .	.	.	2.68	3.45	22.38	24.60
Taunton Hospital, .	.	.	1.39	2.29	15.60	16.23
Northampton Hospital, .	.	.	6.61	4.70	19.01	20.63
Danvers Hospital, .	.	.	7.66	8.33	20.00	21.45
Westborough Hospital, .	.	.	8.85	6.62	12.79	14.42
Boston Insane Hospital, .	.	.	3.87	5.60	7.75	11.57
Insane wards, State Hospital, .	.	.	4.88	1.63	15.85	14.89
Asylum for Insane Criminals, .	.	.	12.50	5.09	39.77	43.96
Other public institutions, .	.	.	4.44	1.48	2.22	.74
Totals and averages, public, .	.	.	5.38	5.00	17.41	19.32
McLean Hospital, .	.	.	3.91	10.59	3.13	9.04
Totals and averages, public and McLean, .	.	.	5.30	5.17	16.65	18.88

TABLE 1.—*Relative to First Cases of Insanity in Public Institutions and McLean Hospital—Continued.*

INSTITUTIONS.	FIRST CASES OF INSANITY—PERCENTAGES—Con.					
	FORMS OF MENTAL DISEASE.					
	PERSONS TO FIRST CASES,			Generally Incurable.		
Curable,	A.	B.	C.	Average Three Years, 1903-1907.	1907.	B and C.
	Average Three Years, 1903-1907.	1907.	Average Three Years, 1903-1907.	Average Three Years, 1903-1907.	1907.	Average Three Years, 1903-1907.
Worcester Hospital,	23.36	27.96	43.55	41.67	32.60	30.19
Taunton Hospital,	23.67	21.76	42.90	43.94	27.86	32.43
Northampton Hospital,	26.45	24.93	36.17	30.72	43.38	44.33
Danvers Hospital,	24.89	31.40	34.26	29.15	37.45	38.31
Westborough Hospital,	23.28	22.89	39.34	41.25	31.43	34.86
Boston Insane Hospital,	17.25	20.41	35.21	34.35	44.72	44.29
Insane wards, State Hospital,	10.98	15.04	25.61	23.18	63.41	61.78
Asylum for Insane Criminals,	20.45	25.77	60.23	54.23	18.18	19.61
Other public institutions,	—	—	—	—	100.00	100.00
Totals and averages, public,	22.27	24.71	37.66	36.89	37.62	37.58
McLean Hospital,	43.75	48.90	19.53	17.60	21.09	28.28
Totals and averages, public and McLean,	23.41	25.71	36.70	36.08	36.74	37.16

TABLE I.—Relative to First Cases of Insanity in Public Institutions and McLean Hospital—Continued.

INSTITUTIONS.	FIRST CASES OF INSANITY — PERCENTAGES — Con.					
	RECOVERIES TO FIRST RECOVERIES.			FORMS OF MENTAL DISEASE — Con.		
	Curable,		Generally Incurable,	MANIC DEPRESSIVE INSANITY.		AUTO ALCOHOLIC INSANITY.
	A.	B and C.		1907.	Average Three Years, 1905-1907.	1907.
	1907.	Average Three Years, 1905-1907.		1907.	Average Three Years, 1905-1907.	Average Three Years, 1905-1907.
Worcester Hospital,	.	.	.	91.30	93.95	10.46
Taunton Hospital,	.	.	.	90.00	93.15	11.70
Northampton Hospital,	.	.	.	100.00	—	16.94
Danvers Hospital,	.	.	.	97.96	98.85	.46
Westborough Hospital,	.	.	.	64.62	73.59	35.38
Boston Insane Hospital,	.	.	.	100.00	98.67	—
Insane wards, State Hospital,	.	.	.	100.00	93.34	—
Asylum for Insane Criminals,	.	.	.	100.00	100.00	—
Other public institutions,*	.	.	.	—	25.00	41.67
Totals and averages, public,	.	.	.	87.45	90.83	11.74
McLean Hospital,	.	.	.	72.72	86.74	13.64
Totals and averages, public and McLean,	.	.	.	86.24	90.55	11.90
					8.83	11.60
					10.02	10.25
					39.84	41.13
					11.52	11.52
						7.91
						7.60
						7.80
						3.07
						—

TABLE 1.—*Relative to First Cases of Insanity in Public Institutions and McLean Hospital—Continued.*

INSTITUTIONS.	FIRST CASES OF INSANITY — PERCENTAGES — CON.					
	FORMS OF MENTAL DISEASE — CON.			COARSE BRAIN LESIONS.		
	CHRONIC ALCOHOLIC INSANITY.	DEMENTIA PRECOX.	GENERAL PARALYSIS.	1907.	Average Three Years, 1905-1907.	Average Three Years, 1905-1907.
Worcester Hospital,	4.14	7.14	27.49	25.38	11.43	10.80
Tannton Hospital,	6.39	5.84	25.63	26.65	5.85	10.24
Northampton Hospital,	4.96	5.77	19.42	17.44	5.79	6.51
Danvers Hospital,	7.02	5.78	21.06	20.47	10.21	10.83
Westborough Hospital,	3.28	5.44	20.98	23.83	7.21	8.14
Boston Insane Hospital,	3.87	3.20	22.89	18.64	17.61	14.12
Insane wards, State Hospital,	10.98	3.66	8.54	9.37	7.32	11.67
Asylum for Insane Criminals,	19.32	20.93	37.50	36.76	6.82	4.44
Other public institutions,	—	—	—	—	—	—
Totals and averages, public,	5.77	6.10	22.75	22.28	9.36	9.23
McLean Hospital,	1.56	.52	3.13	4.50	7.03	12.59
Totals and averages, public and McLean,	5.55	5.88	21.71	21.54	9.24	9.97

TABLE 2.—*Relative to Recoveries of the Insane in Public Institutions and McLean Hospital.*

INSTITUTIONS.	Number.	PERCENTAGE OF ALL RECOVERIES OF INSANE ON —			
		COMMITMENTS,		WHOLE NUMBER OF PERSONS.	DAILY AVERAGE NUMBER.
		1907.	Average Five Years, 1902-1906.		
Worcester Hospital,	.	•	•	•	•
Taunton Hospital,	•	•	•	•	•
Northampton Hospital,	•	•	•	•	•
Danvers Hospital,	•	•	•	•	•
Westborough Hospital,	•	•	•	•	•
Boston Insane Hospital,	•	•	•	•	•
Insane wards, State Hospital,	•	•	•	•	•
Asylum for Insane Criminals,	•	•	•	•	•
Other public institutions,	•	•	•	•	•
Totals and averages, public,	•	•	•	•	•
McLean Hospital,	•	•	•	•	•
Totals and averages, public and McLean,	•	•	•	•	•

TABLE 2.—*Relative to Recoveries of the Insane in Public Institutions and McLean Hospital*—Continued.

INSTITUTIONS.	RECOVERIES.		CURABLE CASES — GROUP A.			
	PERCENTAGE OF FIRST CASES.		PERCENTAGE OF FIRST CASES.		RECOVERIES.	
	1907.	Average Five Years, 1902-1906.	Number.	1907.	Average Three Years, 1903-1907.	Number.
Worcester Hospital,	11.19	19.06	96	23.36	27.87	42
Taunton Hospital, .	8.36	10.95	85	23.68	20.99	27
Northampton Hospital, .	12.40	9.12	64	26.45	24.93	30
Danvers Hospital, .	8.43	11.95	117	24.89	29.88	48
Westborough Hospital, .	21.31	20.45	71	23.88	22.65	42
Boston Insane Hospital,	5.28	8.34	49	17.25	20.10	15
Insane wards, State Hospital, .	3	3.66	5.20	9	10.97	15.03
Asylum for Insane Criminals, .	9	10.23	17.41	18	20.45	25.70
Other public Institutions, .	-	-	2.50	-	-	-
Totals and averages, public, .	247	10.80	13.38	500	22.27	24.18
McLean Hospital, .	22	17.18	23.60	56	43.75	44.62
Totals and averages, public and McLean, .	269	11.14	13.70	565	23.39	25.10

TABLE 2.—*Relative to Recoveries of the Insane in Public Institutions and McLean Hospital—Concluded.*

INSTITUTIONS.	FIRST CASES OF INSANITY—CON.		
	MANIC DEPRESSIVE INSANITY.		ACUTE ALCOHOLIC INSANITY.
	PERCENTAGE OF FIRST CASES, 1907.	AVERAGE THREE YEARS, 1905-1907.	
Worcester Hospital,	.	.	9.25
Taunton Hospital,	.	10.31	10.58
Northampton Hospital,	.	9.09	8.36
Danvers Hospital,	.	11.70	7.15
Westborough Hospital,	.	16.94	7.50
Boston Insane Hospital,	.	14.15	8.26
Insane wards, State Hospital,	.	8.30	11.28
Asylum for Insane Criminals,	.	13.07	11.37
Other public institutions,	.	53	
Totals and averages, public,	.	38	
McLean Hospital,	.	30	
Totals and averages, public and McLean,	.	20	
		53	
		33	
		6	
		4	
		6	
		6	
		—	—
		190	8.31
		1	.78
		191	7.91
			7.80
			3.07
			7.60

TABLE 3.—*Relative to Deaths of the Insane in Public Institutions and McLean Hospital.*

INSTITUTIONS.	Number of Deaths. 1907.	PERCENTAGE OF DEATHS ON—			
		WHOLE NUMBER OF PERSONS, AVERAGE FOUR YEARS, 1904-1907.		DISCHARGES AND DEATHS, AVERAGE FOUR YEARS, 1904-1907.	
		1907.	Average Four Years, 1904-1907.	1907.	Average Four Years, 1904-1907.
Insane hospitals: —					
Worcester,	162	9.94	8.83	14.56	12.96
Taunton,	122	8.73	8.69	12.97	13.03
Northampton,	85	7.94	6.97	10.95	10.15
Danvers,	181	9.83	9.04	14.78	13.33
Westborough,	113	8.63	8.50	12.81	12.73
Boston,	132	12.27	11.90	18.24	18.32
Totals and averages,	795	9.57	8.96	14.05	13.21
Insane asylums: —					
Worcester,	61	5.80	5.79	6.69	6.54
Medfield,	82	5.33	5.12	5.57	5.33
State Colony,	15	2.91	1.34	3.60	1.82
Totals and averages,	158	5.13	4.96	5.67	5.53
Hospitals and asylums,	953	7.97	7.91	11.28	10.85
Miscellaneous: —					
Insane wards, State Hospital,	102	13.44	13.81	16.37	17.39
Asylum for Insane Criminals,	21	3.32	3.46	3.83	4.00
Hospital for Epileptics,	17	5.33	4.87	6.18	6.57
Foxborough State Hospital,	25	11.47	5.27	16.52	8.75
Total and averages, public,	1,118	8.76	8.35	11.13	10.74
McLean,	20	5.66	5.98	10.40	10.39
Totals and averages, public and McLean,	1,138	8.69	8.30	11.12	10.74

TABLE 3.—*Relative to Deaths of the Insane in Public Institutions and McLean Hospital*—Continued.

INSTITUTIONS.	PERCENTAGE OF PERSONS WHO DIED AFFECTIONED WITH CERTAIN MENTAL DISEASES.							
	Curable Forms (Group A). ¹	Average Three Years, 1905-1907.	Senile Insanity.	Average Three Years, 1905-1907.	General Paralysis.	Average Three Years, 1905-1907.	Coarse Brain Lesions.	Average Three Years, 1905-1907.
Insane hospitals: —								
Worcester,	8.64	11.35	29.63	26.92	28.81	27.07	10.49	9.82
Tannin,	12.30	12.35	28.33	27.34	21.31	23.26	5.74	7.47
Northampton,	8.23	10.61	40.00	39.59	11.76	13.16	10.59	10.10
Dauvers,	11.05	13.50	23.20	24.78	22.10	23.07	19.34	14.27
Westborough,	3.54	6.22	36.33	31.97	17.70	21.34	11.50	11.69
Boston,	9.09	11.16	37.88	39.62	27.27	24.66	6.82	7.54
Totals and averages,	9.06	11.10	31.70	30.82	22.62	22.97	11.32	10.38
Insane asylums: —								
Worcester,	—	—	—	11.47	9.41	4.92	—	.31
Medfield,	—	—	—	—	—	2.43	4.39	2.55
State Colony,	—	—	—	6.67	7.78	—	11.10	7.22
Totals and averages,	—	—	—	5.06	4.01	3.16	3.80	2.53
Hospitals and asylums,								
7.56	9.39	27.28	26.65	19.31	19.96	10.07	9.14	
Miscellaneous: —								
Insane wards, State Hospital,	8.82	9.56	28.43	28.78	7.84	8.72	4.90	4.50
Asylum for Insane Criminals,	—	1.75	14.28	19.62	9.52	9.88	4.76	3.03
Hospital for Epileptics,	—	—	—	—	—	—	—	—
Foxborough State Hospital,	—	—	8.00	5.02	4.00	6.46	—	—
Totals and averages, public,	7.25	9.00	26.30	25.54	17.44	18.25	9.12	8.35
McLean,	30.00	21.21	30.00	22.55	20.00	30.43	5.00	14.88
Totals and averages, public and McLean,	7.64	9.22	26.36	25.48	17.49	18.50	9.05	8.48

¹ See Table XIII of Appendix for forms.

TABLE 3.—*Relative to Deaths of the Insane in Public Institutions and McLean Hospital—Concluded.*

INSTITUTIONS.	PERCENTAGE OF PERSONS WHO DIED AFFECTED WITH CERTAIN PHYSICAL DISEASES.						Average Three Years, 1905-1907.					
	Tuber- culosis.	Average Three Years, 1905-1907.	Pneumonia.	Average Three Years, 1905-1907.	Organic Cardiac Disease.	Organic Renal Disease.						
Insane hospitals:												
Worcester,	.	8.64	10.35	26.54	28.27	6.17	10.72	2.47	2.78	1.85	2.84	
Taunton,	.	4.10	8.67	18.85	17.27	10.66	4.51	4.10	1.37	2.46	.82	
Northampton,	.	8.24	8.47	3.63	3.78	4.41	10.09	2.35	1.70	4.71	5.89	
Danvers,	.	15.47	14.44	30.39	31.35	8.84	12.19	7.18	4.69	2.21	1.73	
Westborough,	.	15.04	13.29	12.39	10.01	9.73	9.06	7.58	1.54	.88	1.80	
Boston,	.	9.83	9.14	21.97	18.39	4.55	5.49	3.03	1.54	—	.79	
Totals and averages,	.	10.57	11.02	21.01	20.37	8.05	8.85	4.91	3.33	1.89	2.12	
Insane asylums:												
Worcester,	.	29.51	28.08	21.31	21.42	14.75	14.57	3.28	2.35	4.92	3.01	
Mcfield,	.	17.07	20.20	3.66	2.55	24.39	19.63	1.22	1.32	6.09	4.59	
State Colony,	.	26.66	36.66	6.67	2.22	33.34	16.67	13.33	4.44	—	5.66	
Totals and averages,	.	22.78	23.84	10.76	9.75	21.53	17.80	3.16	2.06	5.06	4.01	
Hospitals and asylums,	.	12.51	12.97	19.31	18.73	10.28	10.33	4.62	3.13	2.41	2.42	
Miscellaneous:												
Insane wards, State Hospital,	.	21.57	25.76	4.90	6.36	25.49	23.31	1.96	.65	.98	1.07	
Asylum for Insane Criminals,	.	23.81	32.34	—	4.65	4.76	4.73	9.52	6.07	9.52	6.68	
Hospital for Epileptics,	.	5.88	12.97	5.88	6.48	—	2.56	—	—	—	—	
Foxborough State Hospital,	.	12.00	4.00	8.00	7.79	8.00	7.77	4.00	1.33	4.00	1.33	
Totals and averages, public,	.	13.51	14.52	17.17	16.91	11.36	11.55	4.38	2.92	2.42	2.31	
Totals and averages, public and McLean,	.	10.00	3.33	5.00	6.29	5.00	1.67	5.00	5.59	—	1.33	
Totals and averages, public and McLean,	.	13.44	14.30	16.96	16.76	11.25	11.36	4.39	2.97	2.37	2.30	

THE WHOLE NUMBER OF THE FEEBLE-MINDED

under care Oct. 1, 1907, was 1,491, being 1 feeble-minded person to every 2,090 of the estimated population of the State. There were enumerated in the State census of 1905, 2,778 feeble-minded persons, of whom 1,287 were living in the community. This figure is probably far below the actual number if it were possible to make an accurate enumeration.

The feeble-minded appear under public care in institutions and almshouses, and under private care in private institutions. Their number and increase in these locations for the year, and the previous five years, are shown as follows:—

	NUMBER OCT. 1, 1907.			INCREASE OVER PREVIOUS YEAR.						AVERAGE INCREASE, FIVE YEARS.
	MALES.	FEMALES.	TOTALS.	1907.	1906.	1905.	1904.	1903.	1902.	
SCHOOL FOR FEEBLE-MINDED, .	703	515	1,218	93	92	181	47	24	74	84
WRENTHAM STATE SCHOOL, .	10	-	10	10		-				
HOSPITAL COTTAGES, . . .	8	9	17		2	21	31	41	20	2
ALMSHOUSES, . . .	95	91	186	51	351	11	811	61	71	261
TOTAL PUBLIC, . . .	816	615	1,431	103	59	178	371	14	87	60
ELM HILL INSTITUTE, . . .	47	13	60	1	31	11	51	6		
TOTAL PUBLIC AND PRIVATE,	863	628	1,491	104	56	177	421	20	87	60

¹ DECREASE.

INCREASE OF THE FEEBLE-MINDED

under care for the year was 104, compared with 56 the previous year, and 60, the average for the previous five years.

The number of non-resident feeble-minded was 91, compared with 89 the previous year. Of these, 41 were patients in private institutions, 50 private patients in State institutions.

It is the policy of the State to receive feeble-minded persons from other States only when there is no school for the feeble-minded in such States, and then only in urgent cases. The non-resident patients are paid for at a rate which fully compensates the State for the cost of their maintenance.

The increase of the feeble-minded under public care was 103,

compared with 59 the previous year, and 60, the average the previous five years.

The increase of the feeble-minded under private care was 1, compared with a decrease of 3 the previous year.

The increase of the feeble-minded in public institutions was 98, compared with 92 the previous year, and 86, the average the previous five years.

The increase of the feeble-minded in public institutions is in no sense an index of the increase of feeble-mindedness in the State. It is directly dependent upon the extent of public provision for such, inasmuch as there are hundreds of such children in urgent need of such care, who are now living in their homes and elsewhere in the community, but would appear in institutions if adequate accommodation were available for them. Their apparent rapid increase in recent years is due to the policy which the State has pursued of late, and still has need to continue,—of progressively extending provision for this class. Public provision for the feeble-minded has more than doubled during the last six years.

The State should add on the average one hundred beds a year as the minimum requirement for such persons.

THE WHOLE NUMBER OF THE EPILEPTIC under care October 1, 1907, was 1,124, being 1 epileptic to every 2,772 of the estimated population of the State. There were enumerated in the State census of 1905, 2,140 epileptics, of whom 1,016 were living in the community. This figure is probably far below the actual number if an accurate enumeration could be made.

The epileptic appear under public care in the Hospital for Epileptics, insane hospitals and asylums, and other public institutions, and under private care in private institutions. Details will be found under the Hospital for Epileptics and in Table IX of the Appendix.

Their number and increase in these locations for the year and for the last five years are shown as follows:—

	NUMBER Oct. 1, 1907.			INCREASE OVER PREVIOUS YEAR.					Average Increase, Five Years.
	Males.	Females.	Totals.	1907.	1906.	1905.	1904.	1903.	
Hospital for Epileptics, . . .	302	268	570	39	10	62	37	45	38
Insane hospitals and asylums, . .	223	159	382	1	23	34	29	12	20
Other public institutions, . . .	98	60	158	41	121	361	21	11	41
Total public,	623	487	1,110	36	21	60	87	68	54
Private institutions,	7	7	14	2	11	1	2	2	1
Total public and private, . .	630	494	1,124	38	20	61	89	70	55

¹ Decrease.

In addition, the overseers of the poor report (March 31, 1907) 33 epileptics in city and town almshouses.

INCREASE OF THE EPILEPTIC

under care for the year was 38, compared with 20 the previous year, and 55, the average the last five years.

The increase of the epileptic under public care was 36, compared with 21 the previous year, and 54, the average the last five years.

The increase of the epileptic under private care was 2, compared with a decrease of 1 the previous year, and 1, the average increase the last five years.

The increase of the epileptic under public care, like that of the feeble-minded, does not represent the rate of increase in the frequency of occurrence of epilepsy. They are coming under public supervision in greater numbers, probably because of the establishment of a special hospital for them.

It would be wise to continue the recent policy of progressive enlargement of accommodation for this class, especially for children. The experience of the Hospital Cottages for Children, where the average age at admission is about ten years, shows that about 1 in 10 recovers or ceases to have epileptic seizures for a considerable period, whereas adult epileptics have rarely recovered after their admission to the Hospital for Epileptics.

THE WHOLE NUMBER OF INEBRIATES

under hospital care Oct. 1, 1907, was 107, being 1 inebriate to every 29,120 of the estimated population of the State. This number is but a very small fraction of inebriates, there being some 20,000 commitments made annually to penal institutions, and some 7,000 persons committed for the first time.

It is the intention to exclude from hospital care the criminal inebriate and those who are not of good character and reputation apart from habits of inebriety.

The State provides a special hospital for the treatment of male inebriates, but women are excluded therefrom, and continue to be committed as inebriates to State insane hospitals. The private institutions receive only a few such patients.

Their number and distribution in these locations Oct. 1, 1907, are shown as follows:—

	NUMBER Oct. 1, 1907.			DECREASE OVER PREVIOUS YEAR.						Average Increase, Five Years.
	Males.	Females.	Totals.	1907.	1906.	1905.	1904.	1903.	1902.	
Foxborough Hospital, . . .	90	-	90	19 ¹ 71	44 ¹ 7	6 ¹ 51	17 91	40 ¹ 11	30 ¹ 9	20 ¹ -
Insane hospitals, . . .	-	15	15							
Total public, . . .	90	15	105	26 ¹ 31	37 ¹ 3	11 ¹ -	8 41	41 ¹ 6	21 ¹ -	20 ¹ 1
Private institutions, . . .	2	-	2							
Total public and private,	92	15	107	29 ¹	34 ¹	11 ¹	4	35 ¹	21 ¹	19

¹ Decrease.

DECREASE OF THE INEBRIATES

under such care for the year was 29, compared with 34 the previous year, and 19, the average for the previous five years.

The decrease of the inebriates under public care was 26, compared with 37 the previous year, and 20, the average the previous five years.

The number under private care shows little variation.

The effort to eliminate the criminal and unsuitable class of inebriates from hospital care accounts largely for the recent decrease in their number.

Further details in regard to inebriates will be found under Foxborough State Hospital and in Table IX. of the Appendix.

THE STATE DEBT,

Dec. 1, 1907, on account of institutions for the insane, feeble-minded, epileptic and inebriates, under supervision of the Board, was \$4,513,050, an increase of \$333,000 during the year. The annual interest charge was \$155,606, an increase of \$11,655. The details for each institution are:—

INSTITUTIONS.	LOANS.			INTEREST.		Loan Sinking Fund.
	Issued.	Due.	Amount Dec. 1, 1907.	Increase for the Year.	1907.	
Insane hospitals:—						
Worcester,	1901-1907	1931-1936	\$173,000 00	\$55,000 00	\$6,055 00	\$1,925 00
Taunton,	1901-1906	1931-1936	245,600 00	—	8,401 00	—
Northampton,	1901-1907	1931-1934 ¹	173,000 00	20,000 00	5,895 00	700 00
Danvers,	1901-1907	1931-1937	198,600 00	5,000 00	6,781 00	175 00
Westborough,	1901-1907	1931-1937	375,900 00	60,000 00	12,893 50	2,100 00
Totals,	• • • • •	• • • • •	\$1,172,100 00	\$140,000 00	\$40,025 50	\$4,900 00
Insane Asylums:—						
Worcester,	1902-1906	1931-1935	\$370,500 00	\$12,967 50	51,443 00	Prisons and hospitals.
Medfield,	1894-1907	1924-1936	1,469,800 00	—	15,407 00	Medfield Asylum.
State Colony,	1902-1906	1931-1935	440,200 00	—	—	Prisons and hospitals.
Totals,	• • • • •	• • • • •	\$2,280,500 00	\$22,000 00	\$79,817 50	\$770 00
Hospitals and asylums,	• • • • •	• • • • •	\$3,452,600 00	\$162,000 00	\$119,843 00	\$5,670 00
Miscellaneous:—						
Hospital for Epileptics,	1895-1907	1925-1936	\$548,450 00	\$65,000 00	\$17,843 50	\$2,275 00
Foxborough State Hospital,	1906-1907	1935 ¹	130,000 00	30,000 00	4,550 00	1,050 00
School for the Feeble-minded,	1902-1907	1931-1935 ¹	332,000 00	26,000 00	11,620 00	910 00
Wrentham State School,	1906-1907	1935 ¹	50,000 00	50,000 00	1,750 00	1,750 00
Totals,	• • • • •	• • • • •	\$1,069,450 00	\$171,000 00	\$35,763 50	\$5,985 00
Aggregates,	• • • • •	• • • • •	\$4,513,650 00	\$333,000 00	\$155,606 00	\$11,655 00

¹ Due in part after one year at the option of the State Treasurer.

THE VALUATION OF INSTITUTIONS

for such Dec. 1, 1907, was \$12,040,992.74, increase, \$431,012.38; real, \$10,167,256.25, increase, \$353,935.90; personal, \$1,873,736.49, increase, \$77,076.48.

The details for each institution are set forth in Tables II. and III. of the Appendix.

STATE EXPENSES

on account of these classes are incurred by the State Board, at the institutions under its supervision, and in family care of the harmless insane. They amounted to \$2,892,161.52 for the fiscal year ending Nov. 30, 1907.

EXPENSES OF THE STATE BOARD

were \$5,999.07 for office, travelling and contingent expenses and printing its annual report; \$25,731.76 for salaries; \$11,200.27 for transportation and deportation of patients.

Details of these expenses may be found in the financial statement of the Board on a later page.

EXPENSES AT INSTITUTIONS

for the insane, feeble-minded, epileptic, inebriates and of the harmless insane boarded in families were \$2,892,161.52, of which \$2,185,710.38 were for maintenance, \$225,053.42 for depreciation, and \$438,466.61 increasing value of institution plants.

RECEIPTS OF INSTITUTIONS

for support of such patients, from sales and other sources, for the year were \$491,493.34, so that the net expenses on account of these classes were \$2,400,668.18.

Such expenses and receipts are tabulated according to classes and institutions as follows:—

STATE BOARD OF INSANITY.

[Jan.]

Receipts and Expenses on Account of Institutions for the Insane, Feeble-minded, Epileptic and Inebriate, for the Fiscal Year ending Nov. 30, 1907.

	EXPENSES.			Total Receipts.	Net Expenses.
	Increasing Value of Plant.	Depreciation.	Maintenance.		
State Board of Insanity:— Office, travelling and contingent expenses, salaries, and printing annual report, Transportation and deportation of patients,	—	—	—	\$31,730 83 11,200 27	\$3 65 \$31,730 83 11,196 62
Totals,	—	—	—	\$42,931 10	\$42,927 45
Insane hospitals:— Worcester, Taunton, Northampton, Danvers, Westborough, Boston,	\$46,814 52 3,981 86 9,626 67 5,628 38 44,326 36	\$27,774 49 11,840 83 14,068 00 34,550 68 13,786 75	\$239,592 92 192,776 66 143,089 40 229,712 59 203,519 77	\$314,181 93 208,599 35 166,774 07 269,482 25 80,824 25	\$75,239 36 32,124 04 45,745 39 53,809 00 68,255 29 2,497 69
Totals,	\$109,988 39	\$101,990 75	\$1,084,515 59	\$1,304,494 73	\$27,670 86 \$1,023,823 87
Insane asylums:— Worcester, Medfield, State Colony,	\$21,082 47 22,633 38 35,351 06	\$27,491 84 26,215 21 6,900 47	\$165,488 12 250,176 28 74,141 01	\$214,060 43 298,494 87 116,482 54	\$6,376 32 10,408 46 830 94 \$207,684 11 288,516 41 115,651 60
Totals,	\$78,966 91	\$60,697 52	\$489,803 41	\$629,467 84	\$17,615 72 \$611,852 12
Hospitals and asylums,	\$188,955 30	\$162,688 27	\$1,579,319 00	\$1,930,962 57	\$295,286 58 \$1,635,675 99
Miscellaneous:— Insane wards, State Hospital, Asylum for Insane Criminals,	\$11,449 68 2,951 84	\$82,637 50 71,132 85	\$95,087 18 88,243 69	\$885 96 5,274 68	\$94,191 22 82,969 11

Hospital for Epileptics (Insane),		30,662 20	6,668 76	60,668 72	97,939 68	5,000 82	92,938 86
Foxborough State Hospital (Insane),		24,615 31	5,015 39	49,734 73	79,475 43	1,292 64	78,182 79
Totals,		\$69,436 61	\$26,095 67	\$265,213 80	\$360,745 98	\$12,464 00	\$348,281 98
Total institutions for the Insane,							
Family care,		\$258,391 81	\$188,733 94	\$1,844,582 80	\$2,291,708 55	\$307,750 58	\$1,933,957 97
Total Insane,							
Feeble-minded:—							
School for the Feeble-minded,							
Wrentham State School,							
Reimbursements to small towns,							
Total feeble-minded,							
Epileptic:—							
Hospital for Epileptics (stone),							
Hospital Cottages for Children,							
Reimbursements to small towns,							
Total epileptic,							
Inebriates:—							
Foxborough State Hospital,							
Insane hospitals,							
Total inebriates,							
Aggregates,							

THE WHOLE COST OF SUPPORT

of a patient in a State institution comprises: (1) the interest on the investment, computed for this purpose at the average rate of interest on loans to the State, during the current fiscal year, on the per capita valuation of the institution plant at the beginning of the year; (2) depreciation, being total expenditures for repairs and renewals both from special and maintenance appropriations, the expenses classed as "repairs and improvements" in the analysis of maintenance expenses corresponding to this charge; (3) maintenance, being all expenditures from maintenance appropriations, exclusive of repairs and incidental improvements.

In this discussion the term

CURRENT EXPENSES

includes both depreciation and maintenance expenses, on the ground that the up-keep of an institution plant should be a part of the running expenses.

It appears from the following table that the whole weekly per capita cost of support, for the fiscal year ending Nov. 30, 1907, on the average, for all classes, was \$4.68, of which \$0.68 was the interest on investment, \$0.39 depreciation and \$3.61 maintenance.

Receipts amounted to \$0.86 per capita a week, so that the whole net per capita cost to the State was \$3.82 a week.

If the interest charge be eliminated, the current expenses of these institutions average \$4 a week per capita; and if receipts be deducted, \$3.14.

THE SUPPORT OF THE INSANE

was most expensive, being \$4.86 a week per capita, compared with \$4.68 for all classes. The interest charge was \$0.07 a week per capita more, while the depreciation charge was only \$0.01 a week more and the maintenance charge only \$0.10 more.

It is to be noted that the insane in *hospitals* were supported at an average cost of \$5.10 a week per capita, compared with

\$4.45 in *asylums*. Such increase is largely due to greater expense in maintenance, being \$0.58 a week per capita more in hospitals. The hospitals receive the new patients from the community, and require a more expensive medical and nursing staff; while the asylums receive only chronic cases by transfer from the hospitals, who need relatively less expensive treatment.

The interest charge was \$0.09 a week more per capita in hospitals, while the depreciation charge was \$0.02 less. In these respects there probably would be very little difference on the average between the two classes of institutions or in the institutions for these classes as a whole.

In the comparison of receipts of the different institutions it should be borne in mind that the State supports all the dependent insane, so that there is no income from cities and towns for the board of such patients; but, on the other hand, cities and towns support such inmates as are chargeable to them at the School for the Feeble-minded, the Hospital for Epileptics and the Foxborough State Hospital, thus accounting for the relatively large receipts of these institutions. The large receipts of insane *hospitals* are for board of private patients, while the small receipts of the asylums are due to the exclusion of private patients.

Further details are set forth for each institution in the following table:—

Whole Weekly Per Capita Cost of Support of a Patient in the Institutions for the Insane, Feeble-minded, Epileptic and Inebriates, for the Fiscal Year ending Nov. 30, 1907.

INSTITUTIONS.	Averages Num- ber of Patients 1907.	Valuation of Plant 1906,	Per Capita Valuation.	WEEKLY PER CAPITA COST.				
				Interest 3.47 Per Cent.	Deprac- tion.	Maintain- names.	Gross Cost.	Receipts.
<i>Insane hospitals:—</i>								
Worcester,	1,132	\$1,670,010 21	\$1,475 27	\$0 98	\$4 10	\$5 55	\$1 28	\$4 27
Taunton,	938	760,436 46	810 70	54	24	4 75	66	4 09
Northampton,	773	788,267 07	1,019 75	68	35	3 66	1 14	3 45
Danvers,	1,232	1,806,671 13	1,466 45	98	64	5 60	5 12	84 4 28
Westborough,	907	941,809 20	928 12	62	29	4 36	5 27	1 45
Totals and averages,	4,982	\$6,867,194 07	\$1,177 68	\$0 79	\$0 39	\$3 92	\$5 10	\$1 06
<i>Insane asylums:—</i>								
Worcester,	933	\$870,289 06	\$932 79	\$0 62	\$0 57	\$3 41	\$4 60	\$0 13
Medfield,	1,456	1,663,149 02	1,142 27	76	35	3 30	4 41	\$4 47
State Colony,	428	416,733 12	973 68	65	31	3 31	4 27	4 27
Totals and averages,	2,817	\$2,960,171 20	\$1,047 27	\$0 70	\$0 41	\$3 34	\$4 45	\$0 12
Hospitals and asylums,	7,799	\$8,817,365 27	\$1,130 58	\$0 75	\$0 40	\$3 71	\$4 86	\$0 72
<i>Miscellaneous:—</i>								
Insanewards, State Hospital,	623	\$412,419 73	\$661 99	\$0 44	\$0 35	\$2 58	\$3 37	\$0 03
Asylum for Insane Criminals,	548	311,152 35	567 80	38	10	2 50	2 98	19 2 79
Asylum for Epileptics,	558	551,092 45	987 62	66	46	4 18	5 30	1 51 1 3 79
Hospital for State Hospital;	234	234,149 22	1,158 07	77	60	5 94	7 31	1 19 1 6 12
School for the Feeble-minded,	1,187	768,394 69	647 85	43	40	3 33	4 16	2 10 1 2 06
Totals and averages,	3,170	\$2,327,808 44	\$737 48	\$0 49	\$0 38	\$3 38	\$4 25	\$1 19
Aggregates,	10,969	\$11,155,173 71	\$1,016 97	\$0 68	\$0 39	\$3 61	\$4 68	\$0 86
								\$3 06
								\$3 82

¹ Includes receipts for support of city and town cases.

STATE APPROPRIATIONS

are made to institutions in two forms: (1) special, and (2) maintenance.

Special appropriations are now made, in the main, for land, buildings and improvements adding to original value of the institution plant. Only \$16,121.25 were expended during the fiscal year from special appropriations for repairs and renewals.

Maintenance appropriations provide for current expenses, inclusive of repairs and renewals. Expenditures during the fiscal year from such appropriations for repairs and renewals were \$208,932.16 (inclusive of labor).

In making estimates for appropriations this distinction should be strictly observed. All repairs and renewals necessary to the up-keep of an institution should be included under the head of "repairs and improvements" in the classification of maintenance expenses. Only incidental improvements necessarily involved in repair and replacement should be so included. Special appropriations should provide only for new work adding to original value of the plant.

EXPENDITURES FROM SPECIAL APPROPRIATIONS

to institutions for the insane, feeble-minded, Hospital for Epileptics and Foxborough State Hospital during the fiscal year amounted to \$454,587.86, compared with \$725,922.30 the previous year, and \$685,663.34, the average the last five years.

There was expended for land the sum of \$50,871.99; buildings, \$308,484.74; first furnishing and equipping, \$43,111.30; water supply, \$27,232.02; all other purposes adding to original value of the plant, \$8,766.56; repairs and renewals, \$16,121.25.

Such expenditures this year are below the average, and below the minimum requirement for these purposes, if overcrowding the insane be avoided, and if the policy of steady and progressive extension of accommodation for feeble-minded and epileptic children be continued.

EXPENDITURES FROM MAINTENANCE APPROPRIATIONS

to such institutions, inclusive of repairs and (incidental) improvements, amounted to \$2,273,155.62, compared with

\$2,235,508.44 the previous year, and \$2,095,288.69, the average the last five years.

Salaries, wages and labor amounted to \$837,287.64, compared with \$791,674.20 the previous year.

Food supplies cost \$563,122.51, compared with \$533,588.01.

Clothing and clothing material cost \$97,579.45, compared with \$108,948.14.

Furnishings cost \$90,436.70, compared with \$86,279.92.

Heat, light and power cost \$208,003.93, compared with \$202,589.05.

Repairs and improvements cost \$139,043.03 (exclusive of labor), compared with \$146,800.35.

Farm, stable and grounds cost \$173,598.72, compared with \$161,008.69.

Miscellaneous expenses cost \$164,093.64, compared with \$204,620.08.

Details of such expenses for each institution may be found in Table VI. of the Appendix.

INCREASE OF MAINTENANCE EXPENSES

over the previous year was \$37,647.18, or 1.68 per cent. This is accounted for, in part, by an increase of patients cared for in these institutions. In 1907, 10,978 patients were cared for, compared with 10,545 the previous year, an increase of 433, or 4.11 per cent.

Shortening hours of labor, higher wages and higher prices of food and other supplies were the main factors in increasing expenses.

The increase in salaries, wages and labor was \$45,613.44. The hours of labor have been gradually shortened in response to an urgent public demand during the last five years, and have not yet been reduced to the average outside of institutions.

The increase in cost of food was \$29,534.50. This increase is accounted for by increase in the number of persons fed and the higher prices of food supplies.

The decrease in cost of clothing and clothing material was \$11,368.69. Prices of clothing were higher, but less clothing was bought; the stock on hand at the end of the year was

\$3,979 less than at the beginning. Friends of patients furnish a variable amount from year to year.

The increase in cost of furnishings was \$4,156.78. Higher prices account fully for this increase.

The increase in cost of heat, light and power was \$5,414.89. The heating of new buildings for the accommodation of additional patients would more than account for this increase, but the stock of coal on hand at the end of the year was \$12,926 less than at the beginning.

The decrease in cost of repairs and improvements was \$7,757.31. Such expenditures vary from year to year, according to the needs in each case.

The increase in cost of farm, stable and grounds was \$12,590.04. This was due to the very high prices of grain for stock.

Miscellaneous expenses decreased \$40,526.43. Such decrease indicates that the greatest care was exercised to reduce the expenses of the year.

THE WEEKLY PER CAPITA Cost

of maintenance averaged in these institutions \$3.69, based on net expenses. Net expenses represent every expenditure from maintenance funds made on account of the institutions. They are the gross maintenance expenses, less receipts except for support of patients. Such receipts are income from sale of products, other earnings of the various departments, or repayments for articles purchased for the use of employees and sold to them at cost, *e.g.*, clothing for nurses' uniforms, which is bought by the institution in order that the same material may be used and obtained at the lowest price.

This sum includes an average weekly expenditure of \$0.24 for repairs and improvements, so that the net cost of maintenance, exclusive of depreciation charges, was \$3.45.

In the insane hospitals the weekly cost averaged \$4.22, compared with \$4.15 the previous year, an increase of \$0.07, or 1.68 per cent.

In the insane asylums the weekly cost averaged \$3.65, compared with the same the previous year.

In the insane hospitals and asylums together the weekly cost

averaged \$4.01, compared with \$3.98 the previous year, an increase of \$0.03, or 0.75 per cent.

The cost in hospitals and asylums fairly represents the average for all classes of the insane.

Further information in regard to weekly per capita cost for each institution will be found in Table VII. of the Appendix.

METHOD OF SUPPORT

of patients in such institutions is *private*, if the whole expense be paid from private resources; *reimbursing*, if a part be paid from private resources; and *public*, if the whole be paid by the State or municipality.

The insane are supported by the State so far as they become public charges.

With the same qualification, the feeble-minded and epileptic in public institutions and the inebriates at the Foxborough State Hospital are supported by municipalities if they have settlements therein, and by the State if there be no such settlement.

SUPPORT STATUS OF THE INSANE

on Oct. 1, 1907, and on the average for the year, is shown in the following tabulation:—

NUMBER OCT. 1, 1907.
AVERAGE NUMBER — OCT. 1, 1906 TO SEPT. 30, 1907.

	NUMBER OCT. 1, 1907.			STATE.			REIMBURSING.			PRIVATE.			Total.
	State.	Reim.-bursing.	Private.	Total.	Number.	Percentage.	Number.	Percentage.	Average Rate of Board.	Number.	Percentage.	Average Rate of Board.	
Public institutions,	.	8,943	529	730	10,202	8,839	87.98	476	4.74	3.01	731	7.28	5.42
Family care,	.	234	7	34	275	230	85.50	6	2.23	2.33	33	12.27	3.79
Total public,	.	9,177	536	764	10,477	9,069	87.92	482	4.67	3.01	764	7.41	5.36
Private institutions,	.	-	-	291	291	-	-	-	-	275	-	-	275
Total public and private,	.	9,177	536	1,055	10,768	9,069	85.64	482	4.55	-	1,039	9.81	-
Percentages,	.	85.22	4.98	9.80	-	85.64	-	4.55	-	-	9.81	-	-

It thus appears that 9,069 patients under public care, or 87.92 per cent., were State charges during the year, compared with 88.12 per cent. the previous year; that 482, or 4.67 per cent., were reimbursing, compared with 4.58 per cent. the previous year; and that 764, or 7.41 per cent., were private, compared with 7.30 per cent. the previous year.

The average weekly rate of private board was \$5.36, compared with \$5.68 the previous year; the average reimbursing rate was \$3.01, compared with \$2.95 the previous year.

THE CAPACITY FOR PATIENTS

in all the institutions Oct. 1, 1907, was 12,638, compared with 11,951 the previous year, an increase of 687 beds. The whole number of patients in them was 11,830, compared with 11,357 the previous year, an increase of 473. Hence there was an excess of provision for 808 patients, or 6.39 per cent.

Such excess is more apparent than real, since some 500 temporary beds are still made up nightly in corridors and day spaces, because the excess of day space over dormitory space, after allowing 100 square feet of floor area to each patient, justifies this number of additional beds. Such necessity is to be regretted, for reasons stated in previous reports, and should be obviated by the gradual addition of dormitory space for the reception of permanent beds proportionate to the day space.

Work was in progress at the close of the year or appropriations had been granted for 57 new beds for the insane, 160 beds for the feeble-minded, none for the epileptic; a total of 217 prospective beds, compared with 843 the previous year. If it be borne in mind that the average annual increase of these classes is not less than 500, and that an average of two years or more elapses before the occupancy of a building, after an appropriation has been made therefor, it will appear that the necessity exists for making appropriations for new provision, as recommended in the estimates later presented.

If there should be an unusual influx into institutions, as seems probable with diminishing activity in business, it is likely that overcrowding will supervene before such provision can become available.

	WORKING CAPACITIES.					TOTAL.
	MEN.		WOMEN.		TOTAL.	
	Oct. 1, 1907.	Increase for the Year.	Oct. 1, 1907.	Increase for the Year.	Oct. 1, 1907.	Increase for the Year.
Insane hospitals:—						
Worcester,	611	—	590	—	1,201	—
Taunton,	504	—	415	—	919	—
Northampton,	427	11	391	—	818	1 ¹
Danvers,	584	—	790	22	1,374	22
Westborough,	378	—	565	24	943	24
Boston,	310	8	454	20	764	28
Totals,	2,814	7	3,205	66	6,019	73
Insane asylums:—						
Worcester,	529	167	465	—	994	167
Medfield,	637	13	882	—	1,519	13
State Colony,	356	65	171	50	527	115
Totals,	1,522	245	1,518	50	3,040	295
Hospitals and asylums,						
Worcester,	4,336	252	4,233	116	9,059	368
Medfield,	177	—	477	91	654	91
State Colony,	662	110	—	—	662	—
Foxborough State Hospital (insane),	197	—	—	—	197	110
Totals,	1,036	110	477	91	1,513	201
Total Insane,	5,372	362	5,200	297	10,572	569
Miscellaneous:—						
Hospital for epileptics (sane and insane),	353	—	346	108	699	108
Foxborough State Hospital (inebriate),	95	—	501	—	95	—
School for the Feeble-minded,	761	—	—	—	1,262	—
Wrentham State School,	10	10	—	—	10	10
Totals,	1,219	10	847	108	2,066	118
Aggregates,	6,591	372	6,047	315	12,638	687

¹ Decrease.

	NUMBER OF PATIENTS OCT. 1, 1907.			INCREASE FOR THE YEAR.	DEFICIENCIES OF PATIENTS.				
	Men.	Women.	TOTALS.		NUMBER OF MEN.	NUMBER OF WOMEN.	TOTAL.		
							Number of Men.	Percentage.	
Insane hospitals:—									
Worcester,	584	576	1,160	68	27	14	41	3.41	
Taunton,	490	424	914	29	14	9 ²	5 ⁵	.54	
Northampton,	361	365	726	45	66	26	92	11.25	
Danvers,	543	712	1,255	28	41	78	119	8.66	
Westborough,	354	530	884	43	24	35	59	6.26	
Boston,	333	427	760	52	23 ²	27	4	.32	
Totals,	2,665	3,034	5,699	31	159	171	320	5.32	
Insane asylums:—									
Worcester,	469	506	975	135	60	41 ²	19	1.91	
Medfield,	538	911	1,449	37	99	29 ²	70	4.61	
State Colony,	311	151	462	59	45	20	65	12.33	
Totals,	1,318	1,668	2,986	157	204	50 ²	154	5.06	
Hospitals and asylums,									
186	426	612	1,038	188	353	121	474	5.33	
567	—	567	—	48	9 ²	61	42	6.42	
178	—	178	—	43	95	—	95	14.35	
Totals,	931	426	1,387	157	105	51	156	10.31	
Total insane,	4,914	5,028	9,942	345	456	172	630	5.96	
Miscellaneous:—									
Hospital for Epileptics (sane and insane),	302	268	570	39	51	78	129	18.45	
Foxborough State Hospital (inebriate),	90	—	90	19	5	—	5	5.26	
School for the Feeble-minded,	703	615	1,218	98	58	14 ²	44	3.49	
Wrentham State School,	10	—	10	10	—	—	—	—	
Totals,	1,105	783	1,888	128	114	64	178	8.62	
Aggregates,	6,019	5,811	11,830	473	572	236	808	6.39	

¹ Excess of patients.² Decrease.

STABILITY OF SERVICE

in the different institutions varied little from the previous year. The whole corps of employees in all averaged to rotate 2.7 times, compared with 2.6 times the previous year; the nursing staff 3.3 times, compared with 3 times the previous year. The maximum stability for the whole service was at the Northampton State Hospital, where there were 2.1 rotations; and for the nursing staff at the Hospital for Epileptics and the Foxborough State Hospital, where the rotations were 2.3. The maximum instability was at the Worcester Asylum, where the whole corps of employees averaged to rotate 5.1 times and the nursing staff 7.7 times.

The average length of service of all employees was 4.45 months; of all nurses, 3.68 months; men nurses, 2.79 months; women nurses, 4.73 months.

Notwithstanding unusual efforts to keep the full quota of employees, there was an average shortage of 10 per cent.

Although these handicaps to efficiency of service are exaggerated by the present active competition in the labor market, it is not probable that permanent improvement will occur until suitable adjustment of wages, hours of duty and living conditions is made in harmony with those prevailing in other occupations. Such adjustment is gradually being made, and will advance more rapidly during the coming year if adequate appropriations be made as requested.

These and other details for each institution are set forth in the accompanying table:—

Rotation in Service of Persons employed in Institutions during the Fiscal Year ending Nov. 30, 1907.

INSTITUTIONS.	WARD SERVICE.						WHOLE SERVICE.					
	MEN.			WOMEN.			TOTALS.			Average Number of All Employees.	Number Different Persons employed.	Rotations.
	Average Number of Nurses.	Number Different Persons.	Rotations.	Average Number of Nurses.	Number Different Persons.	Rotations.	Average Number of Nurses.	Number Different Persons.	Rotations.			
Insane hospitals:—												
Worcester,	51	202	4.0	64	152	2.4	115	354	3.1	246	597	2.4
Taunton,	49	227	4.6	58	142	2.4	107	389	3.4	213	556	2.6
Northampton,	30	108	3.6	38	63	1.7	68	171	2.5	144	301	2.1
Danvers,	57	221	3.9	69	210	3.0	126	431	3.4	242	617	2.8
Westborough,	44	206	4.6	72	166	2.3	116	372	3.2	235	678	2.8
Totals,	231	964	4.2	301	733	2.4	532	1,697	3.2	1,080	2,799	2.6
Insane asylums:—												
Worcester,	37	373	10.1	36	191	5.3	73	564	7.7	179	904	5.1
Medfield,	47	167	3.6	93	247	2.7	140	414	3.0	303	863	2.8
State Colony,	25	104	4.2	10	38	3.8	35	142	4.1	72	210	2.9
Totals,	109	644	6.9	139	476	3.4	248	1,120	4.5	554	1,977	3.6
Hospitals and asylums,	340	1,608	4.7	440	1,269	2.7	780	2,817	3.6	1,634	4,776	2.9
Miscellaneous:—												
State Hospital,	25	101	4.0	57	114	2.0	82	215	2.6	179	395	2.2
Hospital for Epileptics,	37	110	3.0	32	59	1.8	69	169	2.3	145	339	2.3
Foxborough Hospital,	22	50	2.3	—	—	—	22	50	2.3	57	125	2.2
School for the Feeble-minded,	23	81	3.5	114	271	2.4	137	352	2.6	226	499	2.2
Totals,	107	342	3.2	203	444	2.2	310	786	2.5	607	1,358	2.2
Aggregates,	447	1,950	4.4	643	1,663	2.6	1,090	3,603	3.3	2,241	6,134	2.7

ESTIMATES OF STATE EXPENSES FOR 1908

on account of the insane, feeble-minded, epileptic and inebriates in Foxborough State Hospital, amount to \$3,019,466.89, excluding estimates for maintenance of the insane departments at the State Hospital and the State Farm, whose estimates are inseparable from those of the institutions as a whole, which are supervised by the State Board of Charity. They comprise estimates by the State Board and by the State institutions.

ESTIMATES BY THE STATE BOARD.

For travelling, office and contingent expenses, including the printing and binding of the annual report,	\$6,500
The increase of \$500 in this estimate is due to a deficiency in the appropriation of last year and the greater cost of printing the annual report.	
For salaries of officers and employees,	26,900
The increase of \$1,100 in this estimate is necessary because of additional clerical work and the regular salary advances based on length of service.	
For transportation and medical examination of State paupers under the charge of the Board,	11,500
This estimate is the same as the previous year.	
For the support of insane paupers boarded out in families, under the charge of the Board,	39,000
The increase of \$2,000 in this estimate is required to support a greater number of patients in families who would otherwise remain inmates in institutions, the amount being proportionate to the increase of previous years.	
For the board of insane persons in the Boston Insane Hospital,	113,000
The increase of \$9,000 in this estimate is required for the support of a greater number of patients in the hospital who would otherwise be State charges in State institutions, the amount being based on the increase of the previous year, and also on account of a deficiency in last year's appropriation.	
For the support of State paupers in the Hospital Cottages for Children,	\$4,000
The decrease of \$2,000 in this estimate is due to a reduction in the number of State charges in that institution supported by order of the State Board of Insanity.	

For expenses in connection with the support of certain feeble-minded persons and children having settlements in certain small towns, \$1,500

This estimate is the same as the previous year.

ESTIMATES BY STATE INSTITUTIONS .

relate (1) to maintenance expenses, inclusive of repairs and improvements, and (2) special expenditures for new buildings, additions, new furnishings and equipment, in the main.

Estimates for Maintenance Expenses

of the State institutions have been considered by the Board, as required by chapter 184, Acts of 1906, and are approved according to the following classification:—

Comparative Estimates for Maintenance during Fiscal Year 1908.

		ESTIMATES FOR EXPENSES OF FISCAL YEAR 1908.								
AVERAGE NUMBER OF PATIENTS.		Salaries, Wages and Labor.	Food.	Clothing.	Furnishings.	Heat, Light and Power.	Repairs and Improvements.	Farm, Stable and Grounds.	Miscellaneous.	Total.
1907.	1908 (estimated).									
Worcester Hospital,	1,132	1,150	\$107,000 00	\$72,000 00	\$13,000 00	\$8,000 00	\$20,000 00	\$14,000 00	\$17,000 00	\$14,000 00
Taunton Hospital,	938	920	\$7,700 00	60,000 00	6,000 00	9,000 00	18,500 00	13,650 00	15,000 00	19,000 00
Northampton Hospital,	773	760	61,500 00	42,500 00	4,250 00	5,250 00	13,000 00	7,000 00	14,500 00	11,000 00
Danvers Hospital,	1,232	1,250	104,000 00	56,000 00	13,000 00	11,000 00	25,000 00	20,000 00	21,000 00	27,000 00
Westborough Hospital,	907	920	90,880 00	57,000 00	6,000 00	13,000 00	18,000 00	10,000 00	14,000 00	18,000 00
Worcester Asylum,	933	1,000	81,000 00	50,000 00	12,000 00	9,500 00	21,000 00	13,000 00	12,000 00	21,500 00
Medfield Asylum,	1,456	1,600	139,000 00	76,500 00	19,400 00	7,500 00	20,400 00	19,800 00	22,300 00	32,700 00
State Colony,	428	500	49,750 00	23,000 00	6,500 00	4,000 00	11,200 00	6,000 00	8,250 00	5,300 00
Hospital for Epileptics,	558	650	58,800 00	36,000 00	4,000 00	5,000 00	17,000 00	7,400 00	9,300 00	11,500 00
Foxborough Hospital,	254	300	28,800 00	20,000 00	2,700 00	2,700 00	17,500 00	4,800 00	6,500 00	12,000 00
School for the Feeble-minded,	1,187	1,270	92,636 00	59,005 00	13,749 00	11,038 00	17,160 00	15,891 00	21,097 00	17,145 89
Wrentham State School,	9	30	3,000 00	5,000 00	1,500 00	—	1,000 00	—	3,000 00	1,500 00
Total,	9,807	10,240	\$910,036 00	\$557,045 00	\$102,099 00	\$855,498 00	\$109,760 00	\$131,541 00	\$162,947 00	\$165,245 89
Expenses 1907,	—	—	\$792,394 41	\$516,246 78	\$86,189 60	\$83,999 79	\$184,906 54	\$125,825 35	\$164,091 20	\$147,586 46
Increase 1908,	—	433	\$117,111 59	\$40,818 22	\$15,909 40	\$1,988 21	\$14,853 46	\$5,715 65	\$1,144 20 ²	\$17,659 43
Receipts in treasury December 1,	—	—	—	—	—	—	—	—	—	\$482,072 32
Total to be appropriated in addition to receipts,	—	—	—	—	—	—	—	—	—	\$1,832,669 57

¹ Includes assessment \$820.89 (City of Waltham).² Decrease.

It thus appears that these estimates as approved by the Board amount to \$2,314,741.89, compared with \$2,101,830.13 expended in 1907, an increase of \$212,911.76, or 10.13 per cent.

Such increase is accounted for (1) by an estimated increase of 433 patients; (2) advance in wages; (3) shortening hours of labor; (4) higher prices of supplies.

The estimates call for an increase of \$117,111.59 in the appropriation for salaries, wages and labor. This is 55 per cent. of the total increase over the maintenance expenses of 1907.

The estimates for food supplies call for an increase of \$40,818.22, or 19 per cent. of the total increase.

These two items account for 74 per cent. of the total increase.

The other classes of expenses present about the normal variation from the preceding year, fully explained by differences in inventories or by the increased demands because of additional patients and maintenance of buildings for them.

ESTIMATES FOR SPECIAL APPROPRIATIONS

for new buildings, additions, new furnishings and equipment at the State institutions have been considered in compliance with section 4, chapter 87, Revised Laws, and are classified below under the title of each institution, with the expression of the Board's opinion as to the necessity and amount of each estimate.

The sum total of the estimates as approved by the State Board is \$502,325, compared with \$393,800 approved last year, and \$235,100 appropriated. The average annual sum appropriated for these purposes during the last nine years is \$512,611.49.

The appropriations of the last Legislature were below the average requirement if over crowding of patients in the near future is to be avoided. The increase in the accumulation of the insane in these institutions last year was 376; of the feeble-minded, 104; of the epileptic, 10; a total increase of 490.

Every bed for the insane will be filled within the current

year, and at least 500 applications for the admission of suitable feeble-minded children are on file at the Massachusetts School for the Feeble-minded. If these appropriations should be made this session of the Legislature, overcrowding would be probable before the buildings could be erected and furnished for occupancy.

These estimates provide 210 beds for the insane, 100 beds for the feeble-minded, 24 beds for nurses, 45 beds for employees, 4 two-room apartments and 4 family apartments.

The increase in the number of nurses and employees, by reason of shortening hours of service, which is steadily going on, will necessitate even larger accommodation than is called for in these estimates, unless additional patients' rooms be vacated to receive them.

Of these estimates, \$240,375, or 48 per cent., are recommended to make provision for patients and nurses; \$261,950, or 52 per cent., for employees, general administration and the purchase of land.

During the last nine years the average percentage of special appropriations devoted to the first purpose was 56, and to the second 44.

The greater proportionate amount required for general purposes this year is due to the need of purchasing land on which to build for the care of inebriates who are now at Foxborough, and to the necessity, which always arises in establishing a new institution, of spending at first a greater proportionate amount for buildings and equipment for general purposes than for patients, as in the case of the new school at Wrentham.

The average cost, according to these estimates, for provision for each insane patient is \$723.81; for each feeble-minded patient, \$800; for both, \$748.38.

Worcester Hospital.

1. Constructing two additions to the main building.	\$100,000
2. Purchase of land,	18,000
	\$118,000

The above estimates are approved by the State Board.

Working plans, specifications and estimate of cost of one of the above additions, as required by section 2, chapter 520, Acts of 1907, have been submitted by the trustees, and are on file with the State Board.

The drawings submitted by the trustees for these additions show two staircases near together at one end of each ward, but with no exit at the opposite end. One of these staircases seems to be unnecessary, and an outside fire-escape is required at the other end of the corridor. It is recommended that consideration be given to the desirability of erecting, in connection with such fire-escape, in the space bounded by the dormitory on one side and the preparation room on the other, a veranda on each floor, which might be open in the summer, and closed by glass in removable sashes in the winter, so that it would serve not only as a landing for the fire-escape, but also a space for open-air treatment of patients. If such modification should be deemed advisable, the narrow porch on the side would not be necessary, and its omission would allow another window in the toilet room, affording a desirable cross-draft.

The purchase of the land is regarded as very important in meeting the future needs of the hospital. It borders the land now owned by the State, and lies close up to the present buildings. If it should pass into the hands of persons who should build private dwellings, their nearness to the hospital and the consequent annoyance from its insane inmates would give rise ultimately to serious complaints by the public, and tend to restrict the usefulness of the institution. Furthermore, the land will be needed in the near future on which to erect employees' houses. The present farm buildings will soon need to be replaced in another location more remote from the public. The Curtis property could be used for this purpose.

Taunton Hospital.

Repairs and alterations in old dwelling house at Raynham Colony, and laying new floors on two wards in main building,	\$2,400
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This estimate is approved by the State Board.

This work is "to be done by persons regularly employed at the institution," and therefore is exempted from the provisions

of section 2, chapter 520, Acts of 1907. The trustees, however, have submitted a floor plan showing dimensions of dwelling house, and an itemized estimate of the cost of labor and materials, which are on file with the State Board.

Danvers Hospital.

Constructing a sidewalk,	\$1,250
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The above estimate is approved by the State Board.

Westborough Hospital.

1. Constructing and furnishing a house for women nurses, .	\$8,375
2. Constructing and furnishing a house for married employees,	4,400
3. Constructing a farmer's cottage,	2,500
4. Additions and alterations in power and heating plant, . .	10,500
5. Constructing a silo and purchasing an ensilage cutter, electric motor and other necessary equipment,	1,000

	\$26,775

The above estimates are approved by the State Board.

All the work is "to be done by persons regularly employed at the institution," and therefore is exempted from the provisions of section 2, chapter 520, Acts of 1907. General preliminary plans, general specifications and itemized estimate of the cost have been submitted, and are on file with the State Board.

Worcester Asylum.

1. Constructing and furnishing building for patients, . .	\$50,000
2. Furnishing rooms for employees and additional farm equipment,	4,500
3. Construction of two silos and extension of electric service,	2,400

	\$56,900

The above estimates are approved by the State Board.

Working plans, specifications and estimate of cost of the above building, as required by section 2, chapter 520, Acts of 1907, have been submitted by the trustees, and are on file with the State Board.

The rest of the work is "to be done by persons regularly employed at the institution," and therefore is exempted from the provisions of section 2, chapter 520, Acts of 1907. An itemized schedule of articles and materials has been submitted, and is on file with the State Board.

A small appropriation for extension of sewerage and water systems may be requested later, when the requirements of the State Board of Health have been ascertained definitely.

Medfield Asylum.

1. Additions and alterations to power and heating plant,	\$12,000
2. Purchase of land,	1,200
	<hr/>
	\$13,200

The above estimates are approved by the State Board.

Specifications and estimate of the cost of additions and alterations to power and heating plant, as required by section 2, chapter 520, Acts of 1907, have been submitted by the trustees, and are on file with the State Board; but no plan has been submitted, because the new work is to be identical with the old, which is to be inspected by the bidders.

State Colony.

1. Constructing and furnishing superintendent's house,	\$10,000
2. Constructing and furnishing house for employees,	4,500
3. Purchase of land and buildings, and repairs thereon,	1,000
4. Construction of additions to two barns, of two silos, two hen houses and slaughter house, and minor improvements,	3,500
5. Providing necessary water supply,	18,000
	<hr/>
	\$37,000

The above estimates are approved by the State Board.

Working plans, specifications and estimate of cost of the superintendent's house, required by section 2, chapter 520, Acts of 1907, have been submitted by the trustees, and are on file with the State Board.

The rest of the work is "to be done by persons regularly employed at the institution," and therefore is exempted from the provisions of section 2, chapter 520, Acts of 1907. An

itemized schedule of articles and materials has been submitted, and is on file with the State Board.

The approval of water supply is conditional upon the final approval of the State Board of Health after additional tests have been made as to the sufficiency of the supply.

Asylum for Insane Criminals.

Finishing and furnishing dining room for 150 patients in the basement of addition to nurses' home,	\$2,000
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This estimate is approved by the State Board.

This work is "to be done by persons regularly employed at the institution," and therefore is exempted from the provisions of section 2, chapter 520, Acts of 1907. The trustees, however, have submitted a floor plan showing the dimensions of this dining-room, and an itemized estimate of the cost of labor and materials, which are on file with the State Board.

Hospital for Epileptics.

1. Moving and repairing barns,	\$8,500
2. Constructing and furnishing house for employees,	5,900
3. Finishing and furnishing rooms in the basement of women's south building,	3,900
4. Constructing two bread ovens, alterations in heating ad- ministration building, purchase of an ensilage cutter, electric motor and other necessary equipment,	3,700
	<hr/>
	\$22,000

The above estimates are approved by the State Board.

The trustees' estimate for furnishing is reduced \$315, because the Board deems it not necessary to furnish the rooms occupied by the employee's family at the expense of the State.

The sum of \$100 is deducted from the trustees' estimate of the cost of two bread ovens, because red-faced brick may be substituted for enamel-faced brick, and will cost that amount less.

Working plans, specifications and estimate of cost of the employees' house and for finishing basement of the women's south building, as required by section 2, chapter 520, Acts of 1907, have been submitted by the trustees, and are on file with the State Board.

The rest of the work is "to be done by persons regularly employed at the institution," and therefore is exempted from the provisions of section 2, chapter 520, Acts of 1907. An itemized schedule of articles and materials has been submitted, and is on file with the State Board.

Foxborough Hospital.

Purchase of land and buildings and chattels thereon,	\$50,000
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The above estimate is approved by the State Board.

Wrentham State School.

1. Constructing and furnishing two dormitories,	\$80,000
2. Constructing, furnishing and equipping service building,	33,000
3. Constructing and equipping power and heating plant and mechanics' building,	35,000
4. Constructing and furnishing house for employees,	11,000
5. Providing necessary water supply,	11,800
6. Purchase of stock and tools for the farm,	2,000
	<hr/>
	\$172,800

The above estimates are approved by the State Board.

The sum of these is \$18,500 less than the amount requested by the trustees, a reduction of \$10,000 being made from the estimate for the two dormitories, \$3,000 from the estimate for service building, \$3,000 from the estimate for power and heating plant and mechanics' building, and \$2,500 from the estimate for employees' house.

A comparison of the cost and conditions of doing similar work at other State institutions has convinced the Board that such reductions may be made without cheapening the quality of construction.

The State Board further recommends that the expensive patented split tile conduit in which it is proposed to run the main steam pipes be replaced by a concrete or other cheaper form of conduit.

The plans of the dormitory buildings show areas about the basement windows 2 feet deep, whereas it was intended that the depth should not exceed 14 inches. It is recommended that the lesser depth be adhered to.

The trustees further request an appropriation of \$11,000 for a spur track; but the State Board desires additional information before expressing its opinion, and recommends postponing the matter this year.

The Board's approval of estimate for water supply is conditional upon the final approval of the system by the State Board of Health after further tests have been made according to its requirement.

Working plans, specifications and estimate of cost of all the above buildings and equipment, as required by section 2, chapter 520, Acts of 1907, have been submitted by the trustees, and are on file with the State Board.

Northampton State Hospital, Massachusetts School for the Feeble-minded, and the State Hospital, so far as relates to the insane, do not desire any special appropriations this year.

SUMMARY OF RECOMMENDATIONS FOR SPECIAL APPROPRIATIONS.

Insane.

Constructing, furnishing and equipping buildings for patients and nurses,	\$160,375
Number of patients provided for,	210
Average per capita cost,	\$723.81
Number of nurses provided for,	24
Average per capita cost,	\$348.96
Patients and nurses provided for,	234
Average per capita cost,	\$685.36
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	97,150
 Total,	 \$257,525

Feeble-minded.

Constructing, furnishing and equipping buildings for patients and nurses,	\$80,000
Number of patients provided for,	100
Average per capita cost,	\$800
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	92,800
 Total,	 \$172,800

Epileptic.

Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs, \$22,000

Inebriate.

Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs, \$50,000

All Classes.

Constructing, furnishing and equipping buildings for patients and nurses,	\$240,375
Number of patients provided for,	310
Average per capita cost,	\$748.38
Number of nurses provided for,	24
Average per capita cost,	\$348.96
Patients and nurses provided for,	334
Average per capita cost,	\$719.68
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	261,950
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Total,	\$502,325

Worcester Hospital.

Opened in January, 1833. Present capacity, 1,201.

Valuation of plant, per capita of capacity, \$1,481; real estate, \$1,298; personal, \$183.

Daily average number of patients, 1,122; decrease for the year, 36.

Number Oct. 1, 1907, 1,160; 3.41 per cent. below capacity.

All commitments, 526; increase for the year, 87.

Commitments as insane, 517; increase for the year, 84.

First cases of insanity, 411; 79.50 per cent.

Voluntary admissions, 1.

Emergency commitments, 3.

Commitments as inebriate, 9 women.

First Cases of Insanity.

Native-born patients, 50.25 per cent.; mothers, 31.11 per cent.; fathers, 29.88 per cent.

Age sixty years or over, 19.9 per cent.

Resident in cities or large towns, 79.08 per cent.; country districts, 20.92 per cent.

Previous duration of insanity, under six months, 53.13 per cent.

Curable forms of insanity, 23.36 per cent.

Causes: congenital, 8.75 per cent.; hereditary, 19.95 per cent.; alcoholic, 29.44 per cent.; senility, 15.09 per cent.; coarse brain lesions, 2.68 per cent.; syphilis, 5.11 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 74; 14.31 per cent. of commitments.

Recoveries of first cases of insanity, 46; 11.19 per cent. of first cases.

Recoveries in curable group A, 42; 43.75 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 162; 9.94 per cent. of whole number of persons treated.

Curable forms of mental disease present in 8.64 per cent.; tuberculosis in 8.64 per cent.; senile insanity in 29.63 per cent.; general paralysis in 28.81 per cent.; coarse brain lesions in 10.49 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$269,406; total receipts, \$75,239; being 49,473 from private patients, \$14,577 from reimbursing patients, \$11,189 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$4.42; the same less repairs and improvements, \$4.16.

Weekly per capita cost of whole service, \$1.59; ward service, \$0.52.

One person employed for every 4.59 patients; 1 nurse for every 9.87 patients.

Average monthly wage for all persons employed, \$31.67; for nurses, \$22.28; men, \$25.97; women, \$19.29. (Compare with Table VIII. of the Appendix.)

The superintendent writes in his report:—

During the winter and early spring the hospital, in common with many of the schools, colleges and other larger institutions of New England, suffered from an epidemic of scarlet fever. There were in all seventeen cases, confined mostly to the nurses, and entirely to the women's wards. Although the disease ran a mild course and resulted in no fatality, it made it necessary to vacate one of our wards and to set it apart as an isolating ward, and to suspend our training school, our entertainments and our Sunday services from February to May. Following this came an outbreak of measles among our farm hands and male attendants. Although neither of these epidemics was serious in itself, both seriously disorganized the orderly routine of the hospital, depriving us, as they did for several months, of the services of a large part of our working force, at a time when we were short of help, and, on account of the peculiar conditions obtaining in the labor market, were unable to get additional employees.

The male nurses' home, which has been under construction for the past year, is now completed and ready for occupancy. The building is designed to accommodate 80 nurses, with the necessary caretakers, and will not only furnish our male employees with a pleasant and spacious home to which they can retire after their duties on the wards are over, but will restore a large number of single rooms originally intended for patients to their proper use.

With the growth of the hospital the accommodations originally designed for violent patients have been outgrown, so that now, whatever the condition of the rest of the hospital wards is as to crowding, our violent wards are always overcrowded. Aside from this, new and vastly improved methods of treatment have come in vogue since these wards were built,—methods which require special appliances and provisions in order to carry them out successfully. Feeling as I do that, until the accommodations for this class of patients are enlarged and provided with modern appliances for caring for such cases, we cannot do for our patients all that might and should be done for them, I would urge that this matter be again brought to the attention of the Legislature.

Although our report of last year recommended an addition to both the men's and women's wards, only one addition was asked for at that time. The need, however, for these additions is a pressing one, and no

less on one side of the building than on the other, and as a year's time, at least, must elapse before they can be completed and ready for occupancy, I would recommend that both be undertaken at once.

TAUNTON HOSPITAL.

Opened in April, 1854. Present capacity, 919.

Valuation of plant, per capita of capacity, \$847; real estate, \$684; personal, \$163.

Daily average number of patients, 944; decrease for the year, 1.

Number Oct. 1, 1907, 914; .54 per cent. below capacity.

All commitments, 447; increase for the year, 11.

Commitments as insane, 441; increase for the year, 12.

First cases of insanity, 359; 81.41 per cent.

Voluntary admissions, 1.

Emergency commitments, 2.

Commitments as inebriate, 6 women.

First Cases of Insanity.

Native-born patients, 44.99 per cent.; mothers, 29.59 per cent.; fathers, 27.8 per cent.

Age sixty years or over, 17.85 per cent.

Resident in cities or large towns, 72.14 per cent.; country districts, 27.86 per cent.

Previous duration of insanity, under six months, 54.33 per cent.

Curable forms of insanity, 23.67 per cent.

Causes: congenital, 2.23 per cent.; hereditary, 14.21 per cent.; alcoholic, 20.89 per cent.; senility, 13.65 per cent.; coarse brain lesions, 1.39 per cent.; syphilis, 1.11 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 43; 9.75 per cent. of commitments.

Recoveries of first cases of insanity, 30; 8.36 per cent. of first cases.

Recoveries in curable group A, 27; 31.76 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 122; 8.73 per cent. of whole number of persons treated.

Curable forms of mental disease present in 12.3 per cent.; tuberculosis in 4.1 per cent.; senile insanity in 28.33 per cent.; general paralysis in 21.31 per cent.; coarse brain lesions in 5.74 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$203,400; total receipts, \$32,124; being \$18,099 from private patients, \$11,647 from reimbursing patients, \$2,378 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$4.13; the same less repairs and improvements, \$3.93.

Weekly per capita cost of whole service, \$1.53; ward service, \$0.64.

One person employed for every 4.41 patients; 1 nurse for every 8.75 patients.

Average monthly wage for all persons employed, \$29.30; for nurses, \$24.19; men, \$26.89; women, \$21.92. (Compare with Table VIII. of the Appendix.)

The superintendent reports:—

It has been increasingly difficult for a number of successive years to secure a sufficient number of young men and women, of the proper quality, to supply the vacancies in our corps of nurses. While the causes for this condition may not all be apparent, two seem to predominate,—the wages paid and the hours of labor. While the wages of other occupations have increased materially during the last few years, the wages paid to nurses in our State hospitals have remained practically unchanged. Recent legislation, moreover, has, either directly or indirectly, shortened the hours of labor of nearly all classes of hospital employees with the exception of the class most needing such relief, namely, our nurses.

I therefore recommend that in estimating our maintenance appropriation we make provision for a reduction in the hours of labor for nurses, together with an increase in wages. I would recommend a ten-hour day six days per week. I would recommend that men nurses be paid

\$25 the first year and \$30 the second, and that women nurses be paid \$20 the first year and \$25 the second.

The graduating exercises of the training school for nurses were made public for the first time last June, when 12 women nurses received diplomas, the largest number in the history of the school. The chairman of your Board, Hon. Loyed E. Chamberlain, delivered the address and presented the diplomas. The exercises were fully attended, both by the friends of the nurses and by the citizens of Taunton. The school now has 35 pupils, 27 women and 8 men. Several of our graduate nurses resigned during the year to pursue postgraduate courses, to take other responsible positions or to engage in private nursing. While we cannot be otherwise than gratified at the success of our graduates in other fields of labor, it is a serious loss to the hospital to be deprived each year of several of our best trained and most competent nurses.

Dr. Curtis W. Farrington of Boston has continued his dental work during the year. The aggregate amount of work done by him is as follows: teeth extracted, 418; sets teeth cleaned, 205; teeth treated, 23; fillings, cement, 90; fillings, silver, 61; roots filled, 1; enamel fillings, 4; sets of false teeth made, 2; plate polished, 1; total number of patients treated, 315.

A small grist mill was installed early in the year. A paroled patient has acted as miller, and has given good service. This has enabled us to grind and mix our own feed, thus saving something on our grain bill.

Efforts have been made during the year to adapt employment to the individual taste and capability of the patient, and to extend the sphere of employment wherever possible. Our three ox teams are handled entirely by patients. For the past ten months a patient has acted as librarian in the hospital library, and has discharged his duties to the satisfaction of all concerned. Three patients have been employed in the offices at clerical work, and for several months one patient did full duty as stenographer satisfactorily. Three patients play instruments in the hospital orchestra, and three others are regular members of the choir.

One hundred and fifty-four patients, 124 men and 30 women, have had full parole of the grounds, and 12 men have had partial parole.

NORTHAMPTON HOSPITAL.

Opened in August, 1858. Present capacity, 818; decrease for the year, 1.

Valuation of plant, per capita of capacity, \$1,032; real estate, \$885; personal, \$147.

Daily average number of patients, 777; increase for the year, 10.

Number Oct. 1, 1907, 726; 11.25 per cent. below capacity.
All commitments, 296; increase for the year, 40.
Commitments as insane, 293; increase for the year, 49.
First cases of insanity, 242; 82.59 per cent.
Voluntary admissions, 3.
Emergency commitments, 1.
Commitments as inebriate, none.

First Cases of Insanity.

Native-born patients, 56.20 per cent.; mothers, 32.22 per cent.; fathers, 30.54 per cent.

Age sixty years or over, 25.21 per cent.

Resident in cities or large towns, 68.6 per cent.; country districts, 31.4 per cent.

Previous duration of insanity, under six months, 44.17 per cent.

Curable forms of insanity, 26.45 per cent.

Causes: congenital, 14.88 per cent.; hereditary, 22.73 per cent.; alcoholism, 30.99 per cent.; senility, 21.07 per cent.; coarse brain lesions, 6.61 per cent.; syphilis, 1.24 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 35; 11.95 per cent. of commitments.

Recoveries of first cases of insanity, 30; 12.4 per cent. of first cases.

Recoveries in curable group A, 30; 46.88 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 85; 7.94 per cent. of whole number of persons treated.

Curable forms of mental disease present in 8.23 per cent.; tuberculosis in 8.24 per cent.; senile insanity in 40 per cent.; general paralysis in 11.76 per cent.; coarse brain lesions in 10.59 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$154,998; total receipts, \$45,745; being \$30,406 from private patients, \$11,860 from reimbursing patients, \$3,479 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$3.77; the same less repairs and improvements, \$3.63.

Weekly per capita cost of whole service, \$1.48; ward service, \$0.50.

One person employed for every 5.38 patients; 1 nurse for every 11.33 patients.

Average monthly wage for all persons employed, \$34.45; for nurses, \$24.55; men, \$28.47; women, \$21.48. (Compare with Table VIII. of the Appendix.)

The superintendent reports:—

Hospital records in this State show that the percentage of recoveries is gradually becoming smaller, and in my opinion this must be expected, not because treatment is less skillful or scientific than formerly, nor because insanity is less amenable to treatment. I believe the superintendent of to-day is more conservative in his classification of results. Some of the patients who are nearly well are allowed to go home, with the hope that recovery will be hastened under the more favorable conditions of home influences and surroundings, and for such as do recover the hospital is not credited. A considerable number of mildly afflicted persons, able to get along comfortably at home and to help support themselves, who may be considered well by their friends, and who, indeed, may be about as well as ever, are not classified on discharge as recovered because, from a medical point of view, they are not in a normal mental condition. Then our records show that a larger number of cases unfavorable for recovery are committed than formerly, principally of organic brain disease and congenital and senile cases. Many of these latter were cared for at home or in almshouses. Those who were physically well were allowed to roam the streets of country towns and villages; being well known to their neighbors they were considered harmless and were tolerated in the neighborhood, especially as the towns had to pay for their support if they were sent to the State hospitals, but now that the State has assumed their support they are sent to the hospitals in increasing numbers. We also receive many aged and infirm, mildly insane or demented, who might be cared for at home if some caretaker could be there to look out for them. Conditions have changed in recent years. Whereas it used to be easy to get piece

work that could be taken home, so that the caretaker could be earning something and looking after the old person at the same time, opportunities to do so are now less frequent, and the one who would be caretaker must go from home to earn his wages.

During the past year we have had among the admissions 29 congenital cases and 36 patients who were seventy years of age or older. As shown in former reports, the number of patients admitted over seventy years of age has increased from a percentage of less than 2 per year during the first fifteen years of the operations of the hospital to a percentage of 12 at present; from a yearly average of 2 persons per year to 37 last year and 36 this year. The admission of so many of these cases alone operates to reduce the percentage of recoveries very considerably.

In the medical treatment of the insane we rely upon general measures to put the patient in good physical health. Elimination of the causes that induced the mental disorder, in so far as this is possible, and removal of the patient from the associations that tended to perpetuate it, with improvement of bodily nutrition, and mental diversion by means of amusement and occupation, are the chief factors in restoring normal mentality. We continue to make extensive use of hydrotherapeutics, the prolonged bath and the wet pack. For ten years we have made no use whatever of restraint, either mechanical or the so-called chemical restraint, and have no restraining apparatus in the hospital; and we make no use whatever of hypnotics.

We encourage amusements of all kinds. A list of the entertainments will be found later in this report. Patients have plenty of occupation in the routine ward work, housekeeping, cooking, ironing and making and mending of clothing of a large institution. Every year there is, necessarily, in buildings so old as these, a great amount of repair work. This is done with our own force of mechanics, carpenters and painters, in all of which work patients have given much assistance. Our tinware and mattresses are made by patients, and much of the repair of furniture, especially the cane-seating of chairs, is done by them. Best of all for patients is the farm work and the digging of trenches, grading and caring for lawns.

Women patients cannot find as much to do on the grounds and out of doors, yet many were engaged in picking berries and peas in the summer. For some of the women who have nothing else to occupy them we have begun basketry, and hope it will prove to be an excellent means of diversion.

We have had 10 patients boarded out during the year. One of these had to be brought back to this hospital because of illness in the family where she was boarding, and 3 were transferred from our care to the care of the State Board of Insanity. We now have 7 patients boarded out,—4 at the expense of the hospital, 2 supported by friends and 1 self-supporting.

The training school has had a successful year. Nine nurses were graduated: Misses Hannah Bollivar, Lillian Brown, Elizabeth Graham, Elida Hervieux, Eulalie J. Lamb, Katherine Reilly, Alice M. Robinson, Emily Stewart and Margaret F. Smith. On October 15 graduating exercises were held, at which Rev. Mr. Woods of Hatfield delivered the address and several members of the graduating class took part in the literary exercises. The presentation of diplomas was followed by refreshments and dancing.

Besides the regular class work,—sixty recitations and fifty-five lectures and demonstrations,—there were courses in cooking by Miss Baer of the Home Culture Clubs and in gymnasium work by Miss Eisenbrey of Smith College.

The training school proves to be of increasing benefit to the hospital by reason of attracting a better class of applicants and fitting them better to care for the patients. Fourteen of the graduates are now in the service of the hospital.

The general prosperity of the country during the past few years has enabled men to get work easily at good wages, consequently we have had difficulty in getting and keeping a sufficient number of men of satisfactory character for attendants. At times during the past summer we were decidedly embarrassed for want of enough men to care for the patients. The work is not attractive and men do not care to take a long course in training, as there is but little demand for trained male nurses, and the wages we can offer are not large. It is not likely that we can ever keep a sufficient number of good men till we can make the positions attractive by shorter hours and better wages. If to these we can add homelike accommodations for married couples we shall go a long way toward remedying the present situation.

It is my great pleasure to record a beautiful gift to the hospital by Mrs. L. D. James, in memory of Mr. James, who for twenty-four years, from 1879 to 1903, as trustee of the hospital, was active in all that pertained to the management of the hospital, and always exhibited the deepest interest in the welfare of its patients.

The memorial is a recreation pavilion for the men. It is beautifully situated in the grove at the north and east of the hospital, protected from the winds of winter and shaded from the summer heat, near enough to be easily accessible and to be lighted and heated from our main plant. In the summer, croquet grounds will be laid out near by. Inside, at the right of the entrance, is a smoking and card room with fireplace, at the left is a billiard room and directly in front is a bowling alley. In addition there are toilet rooms and a room for the caretaker. This building will be a gathering place for patients throughout the day and evening and for employees while off duty. It will be greatly appreciated by all who may use it.

DANVERS HOSPITAL.

Opened in May, 1878. Present capacity, 1,374; increase for the year, 22.

Valuation of plant, per capita of capacity, \$1,359; real estate, \$1,179; personal, \$180.

Daily average number of patients, 1,229; decrease for the year, 67.

Number Oct. 1, 1907, 1,255; 8.66 per cent. below capacity.

All commitments, 587; increase for the year, 63.

Commitments as insane, 586; increase for the year, 66.

First cases of insanity, 470; 80.19 per cent.

Voluntary admissions, 5.

Emergency commitments, none.

Commitments as inebriate, none.

First Cases of Insanity.

Native-born patients, 50.21 per cent.; mothers, 33.98 per cent.; fathers, 33.48 per cent.

Age sixty years or over, 22.39 per cent.

Resident in cities or large towns, 83.62 per cent.; country districts, 16.38 per cent.

Previous duration of insanity, under six months, 43.34 per cent.

Curable forms of insanity, 24.89 per cent.

Causes: congenital, 4.68 per cent.; hereditary, 27.45 per cent.; alcoholic, 23.4 per cent.; senility, 12.34 per cent.; coarse brain lesions, 7.66 per cent.; syphilis, 4.26 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 69; 11.77 per cent. of commitments.

Recoveries of first cases of insanity, 49; 8.43 per cent. of first cases.

Recoveries in curable group A, 48; 41.03 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 181; 9.83 per cent. of whole number of persons treated.

Curable forms of mental disease present in 11.05 per cent.; tuberculosis in 15.47 per cent.; senile insanity in 23.2 per cent.; general paralysis in 22.1 per cent.; coarse brain lesions in 19.34 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$264,881; total receipts, \$53,809; being \$32,775 from private patients, \$18,186 from reimbursing patients, \$2,848 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$4.09; the same less repairs and improvements, \$3.75.

Weekly per capita cost of whole service, \$1.60; ward service, \$0.57.

One person employed for every 5.10 patients; 1 nurse for every 9.79 patients.

Average monthly wage for all persons employed, \$35.37; for nurses, \$24.18; men, \$27.12; women, \$21.77. (Compare with Table VIII. of the Appendix.)

The superintendent writes in his report:—

Rotation in the nursing service, which had become a serious problem a year ago, has been less active the past twelve months. Since the higher scale of wages was adopted, in July, employees in this department have been more inclined to retain positions and become interested in the work.

During the statistical year, 104 autopsies have been performed in the laboratory. This brings the total of autopsies made and recorded up to 1,202. The task of reviewing the anatomical diagnoses in all the autopsies performed since the opening of the hospital has been completed. Many of the earlier cases were adequately described, but were never summarized so as to be of service. The study of these cases will be discussed in a special paper by the pathologist.

The autopsy bacteriology of 100 cases has been systematically worked up in agar plates. The conclusions, to be embodied in a special paper, relate in part to certain novel properties of the cerebro-spinal fluid.

Lumbar puncture has been extensively practised, and the contents

of the cerebro-spinal fluid has been exhaustively studied. Results of practical importance in diagnosis have thus been reached.

A special paper on this subject by Drs. Cotton and Ayer, who performed the work, is soon to be published. Special experiments in anaphylaxis (a phenomenon of lowered resistance) in guinea pigs, with relation to their response to injections of horse serum, engaged the attention of Drs. Southard and Gay for a number of months. Their report upon this work, already published, throws some light on the mechanism of lowered resistance. The rapid production of fatty changes, hitherto considered chronic, was one important point demonstrated histologically. The study of this problem from the side of immunity will continue to engage the attention of Dr. Gay. Drs. Gay and Ayer made an extended study of the blood of the insane, to determine questions of relative tonicity, and demonstrated some original conclusions, which will be published in the medical journals. Immunity studies, with special relation to the problems of an insane hospital, are to be continued. Although Dr. Gay left Danvers at the end of the statistical year, he will continue to advise workers in the laboratory of this hospital.

The laboratory work at Danvers has assumed broad proportions, and we can point with satisfaction to some results of immediate importance already accomplished. But I believe there is the promise of still greater beneficial discoveries from research work along the lines inaugurated.

During the year the medical staff have furnished for publication in medical journals the following papers, viz.: Serum anaphylaxis in the guinea pig; Structural changes in myeline sheaths; Syringal hemorrhage; Cortical neuritis; Histopathology of epilepsy; Isohemagglutination in man; Autopsy bacteriology in 100 cases; Cyst of dura mater; Pneumococcus brain abscess; Cases of melancholia, with autopsy; Cyst of right parietal lobe; Alexic activity; Syphilis; Vertebral gliosis and exophthalmic goitre.

WESTBOROUGH HOSPITAL.

Opened in December, 1886. Present capacity, 943; increase for the year, 24.

Valuation of plant, per capita of capacity, \$941; real estate, \$777; personal, \$164.

Daily average number of patients, 915; increase for the year, 10.

Number Oct. 1, 1907, 884; 6.26 per cent. below capacity.

All commitments, 430; decrease for the year, 6.

Commitments as insane, 404; increase for the year, 9.

First cases of insanity, 305; 75.49 per cent.

Voluntary admissions, 37.
Emergency commitments, 9.
Commitments as inebriate, 11 women.

First Cases of Insanity.

Native-born patients, 64.26 per cent.; mothers, 44.52 per cent.; fathers, 41.55 per cent.

Age sixty years or over, 22.3 per cent.

Resident in cities or large towns, 72.79 per cent.; country districts, 27.21 per cent.

Previous duration of insanity, under six months, 52.92 per cent.

Curable forms of insanity, 23.28 per cent.

Causes: congenital, 2.95 per cent.; hereditary, 12.46 per cent.; alcoholism, 15.08 per cent.; senility, 12.13 per cent.; coarse brain lesions, 8.85 per cent.; syphilis, 5.25 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 90; 22.28 per cent. of commitments.

Recoveries of first cases of insanity, 65; 21.31 per cent. of first cases.

Recoveries in curable group A, 42; 59.15 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 113; 8.63 per cent. of whole number of persons treated.

Curable forms of mental disease present in 3.54 per cent.; tuberculosis in 15.04 per cent.; senile insanity in 36.28 per cent.; general paralysis in 17.70 per cent.; coarse brain lesions in 11.50 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$219,466; total receipts, \$68,255; being \$53,088 from private patients, \$11,174 from reimbursing patients, \$3,993 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$4.60; the same less repairs and improvements, \$4.43.

Weekly per capita cost of whole service, \$1.87; ward service, \$0.65.

One person employed for every 3.85 patients; 1 nurse for every 7.84 patients.

Average monthly wage for all persons employed, \$31.24; for nurses, \$21.95; men, \$26.70; women, \$19.05. (Compare with Table VIII. of the Appendix.)

The trustees recommend striking out the word "insane" from the name of the hospital, and changing it to Westborough State Hospital. This recommendation is cordially approved by the Board.

The pavilion for 24 tuberculous women has been completed and occupied. It is located in the pleasant groves on the shore of the lake, near the Richmond cottages, and will serve its purpose admirably.

There have been unavoidable delays in installing the new water system, but work is now progressing toward completion.

The new service building will provide a central storehouse for receiving and dispensing all supplies,—a most excellent arrangement, facilitating ease of distribution and fixing responsibility in this most important field.

The recent purchase of the Heath farm, of about 160 acres, with a good dwelling house and barns, furnishes a good nucleus for a farmstead group. It is in charge of a man and his wife, who care for 8 patients, and with them carry on the work of the farm and care for 25 cows.

The superintendent writes in his report:—

The cottages for women nurses are full and some of the nurses are sleeping elsewhere. To provide for the probable increase by growth, and also care for the nurses sleeping in the former quarters, I recommend the erection of another building for women nurses similar to those already built.

I have occasionally found a man and wife, both of whom were steady and reliable, who have left us because of having obtained a situation where they could room together; and I recommend the erection of a small building for at least four couple, to see if we cannot provide for, and retain, desirable persons who are married.

We agree with the consulting board:—

The hospital has taken a forward step in the care given to the teeth of the patients. It has been claimed in former years that the State could not afford dental work for those patients who were not self-supporting. Much distress has been occasioned in many of these because of defective teeth or a lack of teeth, and innutrition and weakness have resulted. A dentist now visits the hospital every week, and has accomplished much for the welfare of those patients needing his services.

Several other institutions employ a dentist who visits the hospital at regular intervals and performs a like service for the patients. It should be done by every institution.

The pathologist reports:—

Based upon work done in this laboratory, there was published during the year, in "American Journal of Insanity," Vol. LXIII., No. 4, a study of the neurofibrils of ganglion cells in several types of insanity. Three additional papers have been prepared for scientific societies, two of which are now in the hands of the printer. The autopsies have provided further material which, in consideration of the clinical courses that preceded, is being carefully studied from an anatomical standpoint, with a view to publication.

Thirty-six autopsies were performed during the period which this report covers,—30% per cent. of the death rate,—and 1,630 clinical specimens were submitted to the laboratory for examination. Together these form a total of 1,666 separate examinations.

The interest of those who have taken part in the work of the laboratory has been keen, and the co-operation of the entire staff continues.

BOSTON INSANE HOSPITAL.

Opened in December, 1839. Present capacity, 764; increase for the year, 28.

Valuation of plant, per capita of capacity, \$1,370.

Daily average number of patients, 724; increase for the year, 23.

Number Oct. 1, 1907, 760; .52 per cent. below capacity.

All commitments, 353; increase for the year, 55.

First cases of insanity, 284; 80.45 per cent.

Voluntary admissions, 5.

Emergency commitments, 49.

First Cases of Insanity.

Native-born patients, 57.75 per cent.; mothers, 26.57 per cent.; fathers, 28.78 per cent.

Age sixty years or over, 25 per cent.

Resident in cities or large towns, 96.48 per cent.; country districts, 3.52 per cent.

Previous duration of insanity, under six months, 53.75 per cent.

Curable forms of insanity, 17.25 per cent.

Causes: congenital, 2.11 per cent.; hereditary, 13.73 per cent.; alcoholic, 9.51 per cent.; senility, 16.55 per cent.; coarse brain lesions, 3.87 per cent.; syphilis, 0.34 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 23; 6.52 per cent. of commitments.

Recoveries of first cases of insanity, 15; 5.28 per cent. of first cases.

Recoveries in curable group A, 15; 30.61 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number 132; 12.27 per cent. of whole number of persons treated.

Curable forms of mental disease present in 9.09 per cent.; tuberculosis in 9.85 per cent.; senile insanity in 37.88 per cent.; general paralysis in 27.27 per cent.; coarse brain lesions in 6.82 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$170,685; total receipts, \$129,679; being \$21,271 from private patients, \$108,-133 from the State, \$275 from other sources.

Weekly per capita cost of maintenance computed on net expenses, \$4.46; the same less repairs and improvements, \$4.19.

This hospital is owned and managed by the city of Boston, but is under the general supervision of the State Board. The insane who have a Boston settlement are eligible for admission.

Inasmuch as the city pays its proportionate part of the State tax for the support of all dependent insane under public care in the Commonwealth, it is reimbursed by the State at the rate of \$3.25 a week for each patient who is a public charge in the hospital.

WORCESTER ASYLUM.

Opened in October, 1877. Present capacity, 994; increase for the year, 167.

Valuation of plant, per capita of capacity, \$941; real estate, \$777; personal, \$164.

Daily average number of patients, 911; increase for the year, 155.

Number Oct. 1, 1907, 975; 1.91 per cent. below capacity.

Admitted by transfer, 209; increase for the year, 9.

Deaths of the Insane.

Whole number, 61; 5.8 per cent. of whole number of persons treated.

Tuberculosis was present in 29.51 per cent.; senile insanity in 11.47 per cent.; general paralysis in 4.92 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$183,624; total receipts, \$6,376; being \$5,138 from reimbursing patients, \$1,238 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$3.76; the same less repairs and improvements, \$3.53.

Weekly per capita cost of whole service, \$1.38; ward service, \$0.41.

One person employed for every 5.21 patients; 1 nurse for every 12.76 patients.

Average monthly wage for all persons employed, \$31.19; for nurses, \$22.73; men, \$25.81; women, \$19.63. (Compare with Table VIII. of the Appendix.)

The superintendent reports: —

The physical condition of those admitted has been a little better than usual, and the dementia, which is always present in the majority of

chronic cases, seems not of such a deep and hopeless type as has usually been the case in the transfers of previous years. While occasionally some dement wakes, in a degree, from his stupor, more promise seems to come from the excited and active. In the opening of the building at Grafton for excitable men it has been found that, under their new surroundings, many patients have seemed to show a renewed interest in life. An effort is being made there to induce as many as possible to lead an active, out-of-door life and to become interested in occupation. This effort is meeting with considerable success. Many patients who formerly led an inactive life, refusing all employment, have now voluntarily gone to work, some of them becoming valuable helpers. There is every reason to believe that this number can be greatly increased in the future by the employment of attendants whose special work shall be the training of our patients into habits of industry, which means practically the establishment of a manual training school for the insane. Though a majority of our patients are of middle age or beyond, only a little more than 5 per cent. are confined to their beds.

During all of the early part of the year very great difficulty was experienced in obtaining a sufficient number of employees to properly carry on the work of the different departments. The situation was perhaps the most acute in the nursing staff, due, no doubt, to the fact that the work, if conscientiously performed, is exacting and sometimes unattractive. The general prosperity of the country made it possible for a large percentage of the more desirable persons to seek and obtain work that was more congenial and better paid. The business recession which is now making itself felt, together, probably, with the approach of winter, has now made it possible to make some selection in the applicants for positions, with a corresponding improvement in the character of the service rendered.

Our laborers, workmen and mechanics have for some time served an eight-hour day. While it does not now seem possible to accord this full measure to all of our other employees, I believe that we should make every concession looking to a lessening of the hours of service and a raising of the rate of wages to that level which will attract and retain desirable persons longer in the service of the institution. With this end in view it is proposed, if the necessary maintenance funds be granted, to accord to the nursing staff a service of sixty hours per week, with one day off in seven. It is expected that the institution, during the coming year, will be required to care for an average of about 1,000 patients. Estimating on this basis it will require 25 more nurses under the proposed new conditions than under the old ones.

Two farm cottages which were acquired with the colony property have hitherto remained unoccupied, because they were not suitably located or adapted for the housing of patients. One of these cottages has now for some time been occupied by one of our employees, who maintains his family there. The second cottage is being prepared for

occupancy, and another of our employees proposes to soon move in with his family. I believe that in our future provision looking to the betterment of conditions under which our employees can serve us the furnishing of private cottages for the making of individual homes should be an important feature. The more we can assimilate asylum life, for both patients and employees, to the conditions obtaining in the outside community the better it will be for both.

A very large percentage of our colony lands were, at the time of purchase of the property, either sprout and pasture lands which had never been brought under cultivation, or fields, the tillage of which had long been neglected. A special effort is being made to redeem and reclaim such lands. Every year as large an acreage as possible has been ploughed up and cultivated. The clearing of this land from roots and stones has been largely done by the labor of patients, and has not only been of great benefit to them but has distinctly assisted in increasing the productiveness and value of our farm lands. The chief need now in our farming operations is for a greater acreage of hay and pasture land. The rapid increase in the number of our patients makes necessary frequent additions to our herds. The number of cows should again be added to, in order that the milk supply may continue adequate for our needs. To enlarge our capacity for more rapid redemption of our wild lands, and to further the general work of colony development, more horses should be purchased, with the necessary harness, carts and other equipment which go to carry on this work. In the present condition of our pasture lands considerable feeding of our cows is necessary, even during the summer months. The feeding of ensilage has been so successful that I believe two additional silos should be added to our equipment. For the accomplishment of the above purposes I recommend that your Board ask for an appropriation of \$3,500.

At the colony test wells have been made which furnish a water supply commensurate with our present needs. This supply will, however, need extension. A plan is now being prepared, in conference with the State Board of Health, which will make provision for a future increase of our water supply and will enlarge and perfect our methods of sewage disposal. A further study of our needs makes it seem advisable to undertake, in this direction, a work of greater magnitude than was at first anticipated. An estimate of the amount of money which will be needed for this additional work will be presented in time for the consideration of the Legislature.

MEDFIELD ASYLUM.

Opened in May, 1896. Present capacity, 1,519; increase for the year, 13.

Valuation of plant, per capita of capacity, \$1,129; real estate, \$972; personal, \$157.

Daily average number of patients, 1,461; decrease for the year, 62.

Number Oct. 1, 1907, 1,449; 4.61 per cent. below capacity.

Admitted by transfer, 53; increase for the year, 41.

Deaths of the Insane.

Whole number, 82; 5.33 per cent. of whole number of persons treated.

Tuberculosis was present in 17.07 per cent.; general paralysis in 2.43 per cent.; coarse brain lesions in 3.66 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$276,391; total receipts, \$10,408; being \$5,716 from reimbursing patients, \$4,692 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$3.59; the same less repairs and improvements, \$3.40.

Weekly per capita cost of whole service, \$1.45; ward service, \$0.53.

One person employed for every 4.81 patients; 1 nurse for every 10.42 patients.

Average monthly wage for all persons employed, \$30.19; for nurses, \$23.90; men, \$27.88; women, \$21.85. (Compare with Table VIII. of the Appendix.)

The superintendent writes in his report:—

The health of the patients, which after all is our main consideration, has been quite good during the past year. We have had no serious epidemic nor any accident of consequence. A mild epidemic of measles among the nurses has been the only extraordinary happening during the year. These nurses were quarantined, so there was no danger of its introduction among the patients.

Our patients are growing older and more feeble, and quite a number who have been able to do some work in the past are now too old to longer continue in such places. This has necessitated hiring more help, especially in the laundry and dining rooms.

The standard of care of patients in this Commonwealth is improving from year to year. The night service has been enlarged during the

past year and further improvement is advisable when possible. The help question has, as usual, been one of our problems. It has been difficult during the summer to keep the number of nurses and attendants necessary for the safe conduct of the institution. The nursing force should have shorter hours on duty and an increase of wages. I think this would not only improve the service, but would increase our numbers during the summer, when we are the shortest.

The mechanics, by legal statute, have been placed on a six-day week of eight hours a day each. Some of them have joined unions, and the demand for an increase in wages has been met to a considerable extent. The pay roll has in consequence been considerably increased.

There has been a large increase in price in everything required for the maintenance of the asylum. Percentages made up from the prices prevailing a year ago and those during the last month show increase in almost every commodity required. The highest was 17 per cent. The average increase in all commodities was 11 per cent.

The usual graduating exercises for the training school were held last July. Four nurses had passed all requirements and received diplomas. Two of these are still employed at the asylum. Arrangements have been made by which relays of our nurses are sent to a large general hospital for instruction in surgery and practical experience in caring for surgical cases. I hope this will add to the ability of these nurses and increase their efficiency.

STATE COLONY.

Opened in October, 1902. Present capacity, 527; increase for the year, 115.

Valuation of plant, per capita of capacity, \$924; real estate, \$805; personal, \$119.

Daily average number of patients, 416; increase for the year, 92.

Number Oct. 1, 1907, 462; 12.33 per cent. below capacity.

Admitted by transfer, 110; decrease for the year, 74.

Deaths of the Insane.

Whole number, 15; 2.91 per cent. of whole number of persons treated.

Tuberculosis was present in 26.66 per cent.; senile insanity in 6.67 per cent.; coarse brain lesions in 20 per cent. (Compare with Table 3.)

Finances.

Expenditures from maintenance funds, \$81,131; total receipts, \$831; being \$618 from reimbursing patients, \$213 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$3.64; the same less repairs and improvements, \$3.38.

Weekly per capita cost of whole service, \$1.29; ward service, \$0.46.

One person employed for every 5.93 patients; 1 nurse for every 12.07 patients.

Average monthly wage for all persons employed, \$33.04; for nurses, \$23.99; men, \$25.53; women, \$20.24. (Compare with Table VIII. of the Appendix.)

The trustees state in their report:—

The colony at the present time has a capacity of about 500 patients, which, in our judgment, should not be increased until we have had sufficient time to develop our present patients on the lines upon which the colony was founded.

We have experienced serious difficulty in obtaining sufficient and suitable attendants. This difficulty is not peculiar to the State Colony, and is felt by other institutions, but we have suffered to a greater degree than others because of our isolated situation and our inability to furnish diversion to our employees during their unemployed hours.

We need further quarters for employees of a more home-like character than we now have, and accommodations for married couples. As a beginning in this direction we are now asking for a small appropriation for a building to be devoted entirely to the housing of officers.

The water supply for the colony has been a serious problem during the past year. During the drought of last August our springs ran dry and the supply stored in the pond was entirely exhausted, so that we faced an absolute water famine. In this crisis we purchased about a mile of two-inch pipe and laid it over the ground from the driven wells near the Westminster group, where there seems to be an unfailing source of supply. In the opinion of the expert whom we have employed this is the only supply upon which the colony can rely. The last season has demonstrated that the surface drainage cannot be relied upon, and, in addition, with the growth of the colony the danger of contamination is increasing. The new Gardner group is so near the sources of supply of our pond that it will not be long safe to continue its use. We

therefore renew our recommendations of the last two years, that the Legislature be asked to appropriate money to extend the permanent water supply.

The superintendent reports:—

The men patients have been occupied largely in out-of-door work upon the farm and grounds. The women have been occupied out of doors as much as possible in picking berries, peas, etc., and have taken at least daily walks in suitable weather, but most of the work done by them has been in our domestic departments and sewing rooms.

At the Gardner cottages the experiment of having 50 men and 50 women in each of two buildings, with a congregate dining room in a third building, has proved a success. The men work upon the farm, and the women not only do the sewing and mending for all in this group, but do extra mending for other cottages not occupied by women. They are now about to make the men's outside clothing, which will be sent to them, cut out, from the sewing room at the receiving group.

Mat and rug making has been introduced at the women's receiving ward, and nearly a hundred have been completed at this time. A loom has been installed in the men's receiving ward as a nucleus for a weaving department.

While a marked improvement in the mental condition of many of the patients can be seen, it is now a question of providing suitable winter occupations, so that whatever progress is made through the summer months will not be lost. To provide such occupation it will be necessary to have additional and more suitable room than we now have at our disposal. By building a cottage for some of our married employees it will not only give us the room we need in our women's building for this, but will materially aid us in retaining desirable employees.

Numerous walks and roadways have been built with approximately 5,000 cubic yards of stone taken from fields which have been cleared. About 1,000 tons of stone have been crushed by our stone crusher. A considerable amount of grading has been done. Thirteen acres of land have been reclaimed for planting and 15 acres cleared for pasture land.

Oxen were introduced this summer and have already proved their worth; three pairs have been purchased. A flock of sheep has also been added.

INSANE WARDS, STATE HOSPITAL.

Opened in October, 1866. Present capacity, 654; increase for the year, 91.

Valuation of plant, per capita of capacity, \$731; real estate, \$551; personal, \$180.

Daily average number of patients, 623; increase for the year, 84.

Number Oct. 1, 1907, 612; 6.42 per cent. below capacity.

Commitments as insane, 94; increase for the year, 26.

First cases of insanity, 82; 87.23 per cent.

Admitted by transfer, 99; decrease for the year, 42.

First Cases of Insanity.

Native-born patients, 37.8 per cent.; mothers, 20.29 per cent.; fathers, 18.84 per cent.

Age sixty years or over, 27.16 per cent.

Resident in cities or large towns, 86.59 per cent.; country districts, 13.41 per cent.

Previous duration of insanity, under six months, 32.14 per cent.

Curable forms of insanity, 10.98 per cent.

Causes: congenital, 12.19 per cent.; hereditary, 12.19 per cent.; alcoholic, 21.95 per cent.; senility, 21.95 per cent.; syphilis, 6.1 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 5; 5.32 per cent. of commitments.

Recoveries of first cases of insanity, 3; 3.66 per cent. of first cases.

Recoveries in curable group A, 3; 33.33 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 102; 13.44 per cent. of the whole number of persons treated.

Curable forms of mental disease were present in 8.82 per cent.; tuberculosis in 21.57 per cent.; senile insanity in 28.43 per cent.; general paralysis in 7.84 per cent.; coarse brain lesions in 4.9 per cent. (Compare with Table 3.)

INSANE CRIMINALS.

The patients in institutions for the insane who are classed as criminals numbered at the end of the year 566 men, 41

women, 607 total; of whom 538 men were inmates of the Asylum for Insane Criminals, and 28 men, 41 women, 69 total, of other institutions.

ASYLUM FOR INSANE CRIMINALS.

Opened in September, 1886. Present capacity, 662.

Valuation of plant, per capita of capacity, \$553; real estate, \$416; personal, \$137.

Daily average number of patients, 548; increase for the year, 8.

Number Oct. 1, 1907, 567; 14.35 per cent. below capacity.

Commitments as insane, 97; increase for the year, 9.

First cases of insanity, 88; 90.72 per cent.

First Cases of Insanity.

Native-born patients, 50.57 per cent.; mothers, 30.49 per cent.; fathers, 32.57 per cent.

Age sixty years or over, 3.57 per cent.

Resident in cities or large towns, 75 per cent.; country districts, 25 per cent.

Previous duration of insanity, under six months, 32.94 per cent.

Curable forms of insanity, 20.45 per cent.

Causes: congenital, 5.68 per cent.; hereditary, 13.64 per cent.; alcoholic, 57.95 per cent.; senility, 3.41 per cent.; coarse brain lesions, 12.50 per cent.; syphilis, 2.27 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 10; 10.31 per cent. of commitments.

Recoveries of first cases of insanity, 9; 10.23 per cent. of first cases.

Recoveries in curable group A, 9; 50 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 21; 3.32 per cent. of whole number of persons treated.

Tuberculosis was present in 23.81 per cent.; senile insanity

in 14.28 per cent.; general paralysis in 9.52 per cent.; coarse brain lesions in 4.76 per cent. (Compare with Table 3.)

The medical director writes in his report:—

The medical work of the year has been much the same as in years past. We continue to think well of hydrotherapy and use it freely. The full warm bath and the neutral bath, continued from thirty minutes to one hour, and the wet sheet pack we use frequently to allay excitement and produce sleep. The warm and neutral baths prolonged for days, weeks and even months, recommended by some for intractable cases of mental and motor excitement, we have not tried. We use the electric light bath freely for its stimulating effect on the sweat glands, preparatory to the "Swedish shampoo," "salt glow," "spinal douch," "cold dash" and general massage, which we think we have proven to be excellent alterative and tonic measures. Many of our patients when admitted are manifestly suffering from a sub-acute or chronic blood poisoning. Whether it be painful mental states that check healthy secretions and paralyze digestion, or faulty bodily functions that cause painful emotions, the "vicious circle" makes our problem, and this we find to hold true: that our best efforts to help nature are those aimed to restore the activity of skin, bowel, liver, kidney and stomach. A fair proportion of work and play in the open air seems to be nature's remedies to banish worry and cleanse the blood, but when received many of our patients are in no condition for either work or play. These are they who are promptly and most positively benefited by the electric light baths and flushing of colon, the alternating hot and cold douch and massage which are only substitutes for nature's hygienic methods which have been neglected and perhaps despised.

Our efforts need often to be supplemented by the work which only a competent dentist can do well. It has often been inconvenient and on one occasion was very expensive to take a patient to the nearest dentist for some needed work. I hope that your Board will authorize the purchase of a dentist's chair and such instruments as are useful, and appoint some competent dentist to visit this asylum one day, or one-half day, each week, to do professional work for patients, for such compensation as is customary in other public institutions.

During the year a good deal of work in grading, ploughing and digging stones has been done by patients. Our new industrial building has been nearly completed, the entire upper floor of a building has been opened for hospital and infirmary use, a special diet kitchen, with new gas range, has been equipped and is now being used. The hospital annex for tuberculous cases has been opened and is now occupied, so that the bed of every tuberculous patient may be wheeled on to the open porch, where they are kept while the weather is not too inclement. This hospital annex, which accommodates 12 patients, provides fairly for all

the tuberculous we have among the insane at present, and has proved of great benefit to those so afflicted.

In considering court cases, which term we use to include persons committed to the State Asylum for Insane Criminals under section 16, chapter 218, and sections 15, 16 and 17, chapter 219, Revised Laws, and chapter 257 of the Acts of 1904, which latter is an amendment of sections 11 and 12 of chapter 219, Revised Laws, I would call the attention of your Board to the fact that the greater number of these cases are received without an accompanying statement from any physician as to the facts upon which a diagnosis of insanity is based. The law as it stands does not seem to demand that we receive a copy of any such statement. Section 35 of chapter 87, Revised Laws, which treats of the commitments, under other legislation, to insane hospitals, reads, in part: "A copy of the certificate, attested by the judge, shall be delivered by the person making the commitment to the superintendent of the hospital or other place to which the person shall be committed, and shall be filed and kept with the order of commitment, and within forty-eight hours after the commitment of an insane person to an insane hospital or asylum, the superintendent thereof shall transmit to the State Board of Insanity a copy of such certificate." The usefulness of this law seems too obvious to need any commendation. We think all the reasons calling for such written certificate and the furnishing of an attested copy of such certificate to the hospital superintendent in the case of an insane person not charged with crime apply with even greater force in dealing with the so-called criminal insane.

HOSPITAL FOR EPILEPTICS.

Opened in May, 1898. Present capacity, 699; increase for the year, 108.

Valuation of plant, per capita of capacity, \$960; real estate, \$732; personal, \$228.

Daily average number of patients, 550; increase for the year, 24.

Number Oct. 1, 1907, 570; 18.45 per cent. below capacity.

Insane commitments, 50; increase for the year, 15.

Sane epileptics admitted, 99; decrease for the year, 12.

First cases of epilepsy, 124; being 83.22 per cent. of all epileptics received.

The general statistics for the year are: —

STATE BOARD OF INSANITY.

[Jan.]

	INSANE.			SANE.			TOTALS.		
				Males.	Females.	Totals.	Males.	Females.	Totals.
	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
Patients in hospital Oct. 1, 1906,	147	120	267	136	128	264	283	248	531
Admitted within the year,	31	26	57	83	56	139	114	82	196
Viz.: by commitment,	1	1	2	41	41	84	65	1	149
by transfer,	-	-	-	-	-	-	2	2	2
from escape,	4	1	5	23	2	25	38	27	65
from visit,	178	146	324	219	184	403	397	330	727
Whole number of cases within the year,	22	11	33	73	51	124	95	62	157
Dismissed within the year,	9	2	11	36	25	60	44	27	71
Discharged,	-	-	-	-	-	-	-	-	-
as recovered,	-	-	-	-	-	-	2	2	2
as capable of self-support,	9	2	11	26	21	46	12	8	23
as improved,	-	-	-	8	8	17	20	14	34
as not improved,	11	6	17	9	8	17	20	14	57
Died,	-	-	1	1	1	1	-	1	1
Transferred,	-	-	2	4	24	18	42	26	46
Escaped,	156	135	291	146	133	279	302	268	570
On visit Oct. 1, 1907,	146	131	277	36	36	72	182	167	349
Patients remaining Sept. 30, 1907,	-	-	-	93	90	183	93	90	183
Viz.: State patients,	-	-	-	17	17	24	20	10	30
town patients,	-	-	3	6	7	7	-	1	8
private patients,	-	-	7	1	8	1	7	1	7
reimbursing patients,	171	141	312	197	169	366	368	310	678
Number of different persons within the year,	97	25	52	62	41	103	89	66	156
Number of different persons admitted by commitment,	26	24	50	68	39	97	84	63	147
Number of different persons dismissed,	18	10	28	62	37	98	70	47	117
Number of different persons discharged capable of self-support,	148.34	126.72	275.06	145.82	129.56	275.38	294.16	256.28	560.44
Daily average number of patients,	138.76	121.88	260.64	28.09	23.91	52.00	166.85	145.79	312.64
Viz.: State patients,	-	-	-	100.53	98.13	198.66	100.53	98.13	198.66
town patients,	-	-	-	7.71	7.71	17.20	7.52	20.91	31.43
private patients,	3.71	3.00	6.71	-	-	-	-	-	-
reimbursing patients,	5.87	1.84	7.71	-	-	-	-	5.87	7.71

¹ Nominally admitted to discharge; insane: males, 4; females, 1; total, 5; sane: males, 21; females, 13; total, 34; total, 39.² One female admitted as sane and readmitted as insane.

First Cases of Epilepsy.

Native-born patients, 81.82 per cent.; mothers, 46.28 per cent.; fathers, 42.97 per cent.

Mean age at onset of epilepsy, 14.60 years; when admitted, 24.22 years.

Resident in cities or large towns, 67.74 per cent.; country districts, 32.26 per cent.

Deaths of Epileptics.

Whole number, 34; 5.01 per cent. of whole number of persons treated.

Tuberculosis was present in 2.94 per cent.; epilepsy was the immediate cause of death in 50 per cent. Mean age at first attack of epilepsy, 17.04 years; at death, 35.73 years.

Finances.

Expenditures from maintenance funds, \$133,903; total receipts, \$43,809; being \$7,839 from private patients, \$987 from reimbursing patients, \$33,808 from cities and towns, \$1,175 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$4.58; the same less repairs and improvements, \$4.25.

Weekly per capita cost of whole service, \$1.84; ward service, \$0.70.

One person employed for every 3.84 patients; 1 nurse for every 8.09 patients.

Average monthly wage for all persons employed, \$30.59; for nurses, \$24.74; men, \$28.63; women, \$20.22. (Compare with Table VIII. of the Appendix.)

The trustees report:—

It has been found, after careful examination and investigation, that it is not possible to obtain sufficiently responsible attendants unless they are paid at least reasonable wages. We have established a wage rate by which we give to male attendants \$25 a month at the beginning of the first year, and if they prove satisfactory we expect to raise this to \$30 at the end of a year. Female attendants begin at \$20 per month, and this in like manner is raised to \$25 per month at the end of a year.

This rate seems to be generally agreed upon among the State institutions. It is hardly necessary to call the attention of those interested in institutions such as ours to the extreme importance of obtaining the proper kind of attendants. They must be active, vigilant, sober, honest, and, above all, kind and patient with those who are committed to their care, many of whom are mentally afflicted, nervous, irritable and unreasonable, sometimes even violent. Even with the most careful supervision, attendants have many opportunities to act of themselves for good or for ill towards their patients, and there is, perhaps, no one thing about which our trustees have greater anxiety than the behavior of the attendants, their moral character and their attitude towards those under their charge. It is probable that more evils have in the past occurred in hospitals through incompetent, careless or vicious attendants than from any other cause. Yet they cannot be overlooked every moment. As they must be responsible, they should not be underpaid. They should be — would that they all could be — above suspicion.

The superintendent writes in his report:—

I am glad to report that the past year has been one without serious accident. When we consider the conditions under which we work, the variety of disordered temperaments we have to deal with, and the necessary association of irritable persons, this becomes a matter of congratulation. The advisability of bringing together persons who react individually on one another has been a subject of much comment. On the whole, the theme has been well worked out, and I am positively of the opinion that the discipline acquired by these persons is useful to them. It not only makes them easier to deal with when they return home, but actually has a curative effect, from the fact that they acquire reasonable self-control by the enforced exercise of this trait.

We have a small percentage of recoveries, and the most of the cases referred to above would speedily relapse if they should go back to their home methods of living. The routine life, the reasonable restrictions, self-control enforced by proper regulations, medicine and other treatment, as indications call for them, each forms an element in good results obtained.

The needs in the future have been well studied. While a large number of these are very urgent, it is easy to select a few that are the most pressing. It appears to me that study of the care and treatment of children is one that will occupy our attention most fully during the coming year.

It is important that these children should be housed at a suitable distance from the present buildings; probably a separate colony, within moderately easy reach of the main institution, will be the most convenient method.

I consider that we shall need in this group accommodations for boys and girls in suitable divisions. There must also be kitchen and dining room accommodations for them as well as for employees. Some supervising head, which would probably be medical, teachers and necessary nurses and outside attendants must be provided. The school-rooms will be an important consideration. To include all these elements and supply all the other needs that will come up as we go on with the work will be a matter of great importance.

We cannot begin too soon to carefully and systematically study this question.

FOXBOROUGH STATE HOSPITAL.

Opened in February, 1893. Present capacity, 292; increase for the year, 110.

Valuation of plant, per capita of capacity, \$1,220; real estate, \$1,062; personal, \$158.

Daily average number of patients, 238 (inebriates, 87; insane, 151); increase for the year, 37.

Number Oct. 1, 1907, 268.

Finances.

Expenditures from maintenance funds, \$86,421; total receipts, \$15,777; being \$1,315 from private patients, \$66 from reimbursing patients, \$13,394 from cities and towns, \$1,002 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$6.47; the same less repairs and improvements, \$5.87.

Weekly per capita cost of whole service, \$1.96; ward service, \$0.59.

One person employed for every 5.25 patients; 1 nurse for every 11.65 patients.

Average monthly wage for all persons employed, \$37.99; for nurses, \$29.75. (Compare with Table VIII. of the Appendix.)

Statistics regarding the insane will be found with those of other institutions for the insane, in the Appendix.

The general statistics for the year relative to inebriates are:—

Patients in hospital Oct. 1, 1906,	109
Admissions within the year,	271
By commitment,	214
By transfer,	-
By return from leave of absence of previous years,	39
By return from escape of previous years,	8
By return from visit of previous years,	-
Voluntary,	10
Whole number of cases within the year,	380
Final discharges within the year,	93
By death while in the house,	1
By death while on leave of absence,	-
By death while on visit,	1
By death, escaped,	2
As insane,	6
By time limit while in the house,	12
By time limit while on leave of absence,	6
By time limit while on visit,	1
By time limit, escaped,	2
As not to be benefited by further treatment while in the house,	54
As not to be benefited by further treatment while on visit,	-
Deported,	1
By own request, voluntary,	7
Patients absent, not finally discharged,	197
Leave of absence,	145
Escape,	35
Visit,	17
Patients remaining in hospital Sept. 30, 1907,	90
Viz.: State patients,	53
Town patients,	34
Private patients,	3
Number of different persons within the year,	377
Number of different persons admitted,	271
Persons committed,	214
Daily average number of patients,	86.58
Viz.: State patients,	46.25
Town patients,	36.88
Private patients,	3.45

Inebriates.

Daily average number, 87; decrease for the year, 44.

Commitments, 214; decrease for the year, 58.

Admitted for the first time to any institution for the treatment of inebriety, 111, or 51.86 per cent.

Admitted to this hospital for the first time, 173, or 80.84 per cent.; 41 for the second; 6 for the third; 2 for the fourth; 2 for the fifth.

First Cases of Inebriety.

Native-born patients, 72 per cent.; natives of Massachusetts, 55 per cent.; 40 per cent. of the parents were native born.

Average age at which habit began, twenty-four years; when admitted, forty-one years; 36, or 20.80 per cent., were over fifty years old when admitted.

Average known duration of inebriety, 17.02 years.

Resident in cities or large towns, 144, or 83.23 per cent.; country districts, 25, or 16.77 per cent.

Fifty-four patients were discharged, as not to be benefited by further treatment.

MASSACHUSETTS SCHOOL FOR THE FEEBLE-MINDED.

Opened in October, 1848. Present capacity, 1,262; at Waltham, 1,062; at Templeton, 200.

Valuation of plant, per capita of capacity, \$684; real estate, \$572; personal, \$112.

Daily average number of patients, 1,172; increase for the year, 128.

Number Oct. 1, 1907, 1,218; 3.49 per cent. below capacity.

The general statistics for the year are:—

		Males.	Females.	Totals.
Number Oct. 1, 1906,		668	452	1,120
Admitted within the year,		118	97	215
Viz.: School cases,		76	35	111
Custodial cases,		42	62	104
Whole number of cases within the year,		786	549	1,335
Discharged within the year,		68	21	89
Died within the year,		15	13	28
Number Sept. 30, 1907,		703	515	1,218
Viz.: State patients,		123	112	235
Town patients,		217	196	413
Private patients,		29	24	53
Massachusetts school beneficiaries, . . .		302	153	455
New England beneficiaries,		24	24	48
Supported by invested funds,		8	6	14
Daily average number of patients,		688	484	1,172
Number Sept. 30, 1907, at the school,		516	515	1,031
Number Sept. 30, 1907, at Templeton Colony, . . .		187		187
Applications for admission during the year, . . .				435

Finances.

Expenditures from maintenance funds, \$227,031; total receipts, \$129,697; being \$21,956 from private sources, \$103,798 from cities and towns and \$3,943 from other sources. (Compare with tables V. and VI. of the Appendix.)

Weekly per capita cost of maintenance computed on net expenses, \$3.64; the same less repairs and improvements, \$3.39.

Weekly per capita cost of whole service, \$1.42; ward service, \$0.66.

One person employed for every 5.25 patients; 1 nurse for every 8.66 patients.

Average monthly wage for all persons employed, \$32.27; for nurses, \$24.91; men, \$29.20; women, \$24.05. (Compare with Table VIII. of the Appendix.)

The superintendent reports:—

The school year has been a very happy and prosperous one. Our large family has been blessed with good health. We have received a large number of teachable pupils. The new buildings added during the

past few years permit a very satisfactory grading and classification of our pupils by age, mental and social capacity. We have had an unusually loyal, zealous and efficient staff of officers and employees.

The work of the school and training classes has been carried on with enthusiasm and ability. The manual and industrial work described in the last annual report has been materially developed and increased.

Perhaps the most important educational department of our school to-day is the handwork room, devoted to the manual training of the large group of middle grade girls. Many of these girls have not been able to learn to read or write, or to sew, or to perform any of the finer domestic arts, and 250 of them receive daily instruction in this room. They come in groups of 15 or 20, with their attendant, and have one or two hours' training each day. They are taught to knit, to crochet, to cut rags for weaving rugs, or for braiding or hooking rugs. They are taught to braid and to hook the rugs, and to use the loom which makes the attractive rag carpets. We have made many beautiful rugs and strips of carpet, which are at once put to use in our buildings. This work — using material which does not cost money and produces fabrics of very practical use — has been a very satisfying addition to our industrial work. On the knitting machines our girls have made all the mittens and winter caps required by our 1,200 patients for the winter. We expect at once to begin the knitting of the stockings used by our patients. The wristers, hoods and mittens knitted by hand would do credit to any class.

It is not easy to describe the deep interest and enthusiasm shown by the children in this work. Weaving seems to be peculiarly adapted to develop the power of self-control, of patience and of accurate motor response in the feeble-minded. We have two looms in the boys' department, on which the boys are weaving some first-class crash for towelling. In the new spacious quarters for manual training we hope to extend this work still further.

During the year we have greatly developed the elementary manual training of the boys who are not ready for sloyd work or who are not capable of doing sloyd work, but who are capable of learning to use common tools with interest and a certain amount of intelligence. We have over 190 pupils receiving daily this practical instruction in the use of tools. In many cases a boy for the first time shows self-control and intelligent interest after being given these simple exercises. It is gratifying to report that already 20 boys have left this elementary class to enter the regular sloyd work. Two instructors devote their entire time to the training of the boys in this department.

The systematic musical training introduced last year has proved a very great success. In the music room, Miss Boynton has given her entire time to the instruction of groups of children in vocal and instrumental music. These classes have been made up of boys and girls of different ages, graded according to their age and musical ability.

Altogether 261 pupils receive this musical instruction. The children have shown great interest in this work and have already developed quite remarkable proficiency. The work of the combined classes in part songs and in chorus work would do credit to any school. There are over a dozen girls learning to play the violin and other instruments, and we already have the nucleus of a very good orchestra. The performance of these pupils has contributed very much to the enjoyment of the other children. The pupils in these classes have been absorbingly interested in this musical study and drill. It has done much to pleasantly fill their thoughts and lives, and has greatly added to their self-respect.

Of the 103 cases discharged during the year, 55 were kept at home by their friends for various reasons, 2 were kept at home to attend public school, 2 were committed to insane hospitals, 2 were discharged as insane and not feeble-minded, 1 was taken away by the overseers of the poor of the town, 1, a New England beneficiary, was removed to make room for a younger pupil, 11 went to work for wages, and 11 young, promising pupils were transferred to the Wrentham State School. At this new school for the feeble-minded these brighter adolescents, as graduates of the training department of this school, will assist in the development of the new institution.

In estimating the value of our educational work, it should not be overlooked that a large number of our pupils, who have received great benefit from our school work, are taken home by their relatives or friends after the period of school work is past. The cases who remain at the school are those who are not suitable for community life or those who have no friends to care for them.

The friends of the pupils discharged during the year have been free in their expression of satisfaction with the results of the school training. We have received more letters of this sort during the past year than for many years past. These letters of approval generally refer to the practical usefulness and the good behavior of our former pupils.

It is a pleasure to record another successful and happy year for the farm colony at Templeton. We have had no cases of serious illness and no serious accidents, and the boys have been well and happy. They are now jubilant at the successful result of their year's work.

We have shipped to Waverley ten full carloads of produce, including potatoes, onions, squash, pumpkins, turnips, carrots, cabbage, beets and apples. This bountiful supply of fruit and vegetables enables us to give our children and employees a very varied and healthful dietary, notwithstanding the current high prices of all food supplies. Indeed, the products of the colony farms have already become an appreciable factor in the institution finances. For a large part of each year our dietary is largely made up of home-grown products.

At the colony we have under cultivation this year over 100 acres.

During the year we have cleared 10 acres of wild land. We have 19 horses, 7 yoke of oxen, 55 cows, 34 head of young stock and 66 pigs.

We now have 194 boys at the colony. At Eliot colony the fifth group of dormitory buildings is under construction and will be ready for occupancy in the spring.

The colony has been visited each year by many persons connected with institutional work or interested in the problems connected with the care of defectives and dependents. These visitors evince the greatest interest in the simple life of the colony.

WRENTHAM STATE SCHOOL

is the official title of the new school for the feeble-minded, established under the provisions of chapter 508, Acts of the Legislature of 1906.

The superintendent reports:—

In April was begun the remodelling of one of the old houses for the superintendent's home. In this were installed a hot-water heater and a good plumbing system. It was papered and painted throughout, and for the most part new floors laid. This house was occupied July 3, and, in addition to making an excellent superintendent's home, has been the administration house as well.

Another house was fitted up at a very small expense as a summer camp for 10 boys. This was done by painting the floors, screening the windows, whitewashing and repairing an adjoining woodshed for a dormitory, and fixing up an old shed for a bath house and laundry. The camp was ready on the twenty-sixth day of June, and the boys were transferred from the school at Waltham on that date. Since their arrival they have been keenly interested, and very happy and helpful in making ready the farm group for 50 boys, whom we expect to admit during the winter. These boys consider it a great honor to have been selected from among several hundred boys at the Waltham School to help in the starting of a new institution. We believe our 50 boys, when admitted, will be equally happy in helping to make a home for the next group of admissions.

One of the houses has been thoroughly renovated and fitted up at a small expense for a hospital. It is very satisfactory to know that we have a place in which our people can be properly cared for in case of accident or sickness.

In the spring some of the old land, which had not been cultivated for a number of years, was ploughed and planted with vegetables. Our garden has supplied us with an abundance of vegetables during the summer and autumn, and there is stored in our cellars a plentiful supply for the winter months.

Our chief work, however, has been in providing a suitable group of buildings for our permanent farm department. One of the farms which was admirably situated for this purpose was chosen. This place had a good house, barn and valuable outbuildings. The house is undergoing repairs, and a system of steam heat is installed. A good kitchen annex is being built. Upon a beautiful pine knoll, about 300 feet distant, are the sleeping quarters for the boys, two dormitories and a bath house of simple wood construction. Each dormitory is designed for 25 beds. There is an abundance of refuse wood on the place, which will be used for heating these dormitories.

The barn, which was connected with the house, has been moved back 400 feet, and set on a good foundation provided for it, where there is ample room for a farm yard. When a moderate sum has been expended for repairs, this will make a valuable barn. It will accommodate 8 horses, 12 head of cattle, and furnish storage for 35 tons of hay.

A good poultry building, which will accommodate 300 hens, was too near the house. It also has been removed to a suitable location.

A 10,000-gallon water tank has been erected on a stone tower, at an elevation of 18 feet. Water pipes have been laid from a good well to this tank and to the different buildings, 1,300 feet in all. The water is to be pumped with the windmill which was on the place, reinforced, when necessary, by a small gasoline engine which has been installed at the well.

Another building has been fitted up for a laundry. In this were installed some laundry machinery and a gasoline engine. This machinery is the regular size used in laundry plants, and can be removed to our central laundry when that building is erected.

Our boys have not only cared for and harvested the crops, but have with their own teams done a large part of the excavating, and hauled all of the 1,000 perches of stone used in the construction work. This shows the practical side of training these boys, and the utilization of their labor, but does not emphasize that which is of greater value, namely, the self-reliance and manliness gained by the boys in the doing of this work.

One of the old barns on the premises has made a good temporary stable for our horses and cows.

Having so many old buildings on the place is a great saving of time and money in starting a new institution. Many of the old buildings have already been utilized, and the remaining ones will be used as the institution develops. This advantage is one of the many which exemplifies the foresight of the Board in the selection of this site.

I wish here to thank Dr. Fernald of the Waltham School for the interest he has shown in our work, especially his substantial expression of this interest in the beginning by the selection from his school of such suitable, helpful boys.

HOSPITAL COTTAGES FOR CHILDREN.

This is a private institution, for which the Governor appoints five trustees, in addition to those selected by the corporation. It is maintained from the income of private funds, donations and the board of patients. State and town charges are received for \$3.25 a week, although the weekly cost of support is considerably in excess of this amount. In consideration of this service, the State has from time to time appropriated money for buildings and structural improvements. It is subject to supervision by the State Board of Insanity, to which it makes a financial statement, and furnishes such other information as may be required.

Opened in June, 1882. Present capacity, 140. Daily average number, 134.

Valuation of plant, per capita of capacity, \$737. Permanent funds, \$149,566. Expenditures for maintenance, \$32,176. Receipts, \$38,566; support of State charges, \$6,291; from cities and towns, \$8,626; from individuals for support of patients, \$6,049; from sales, contributions and other sources, \$17,600. Weekly per capita cost of maintenance, \$4.18.

The general statistics for the year are:—

Thirty-five epileptics were admitted, being 70 per cent. of all admissions. Forty epileptics were discharged, of whom 4, or 10 per cent., had recovered.

THE MCLEAN HOSPITAL

is a private institution, a branch of the Massachusetts General Hospital.

Opened in October, 1818. Present capacity, 220.

Valuation of plant, per capita of capacity, \$8,364.

Average per capita cost of maintenance, \$25.68.

Daily average number of patients, 193; increase for the year, 8.

Number Oct. 1, 1907, 205; 6.82 per cent. below capacity.

All commitments, 173; increase for the year, 50.

Commitments as insane, 167; increase for the year, 47.

First cases of insanity, 128; 76.65 per cent.

Voluntary admissions, 104; increase for the year, 40.

Emergency commitments, 10; increase for the year, 6.

First Cases of Insanity.

Native-born patients, 81.25 per cent.; mothers, 57.14 per cent.; fathers, 57.98 per cent.

Age sixty years or over, 20.31 per cent.

Resident in cities or large towns, 75.56 per cent.; country districts, 23.44 per cent.

Previous duration of insanity, under six months, 54.69 per cent.

Curable forms of insanity, 43.75 per cent.

Causes: hereditary, 34.38 per cent.; alcoholic, 5.47 per cent.; senility, 6.25 per cent.; coarse brain lesions, 3.91 per cent.; syphilis, 3.91 per cent. (Compare with Table 1.)

Recoveries of the Insane.

Whole number, 42; 25.07 per cent. of commitments.

Recoveries of first cases of insanity, 22; 17.18 per cent. of first cases.

Recoveries in curable group A, 16; 28.57 per cent. of such curable cases. (Compare with Table 2.)

Deaths of the Insane.

Whole number, 20; 5.66 per cent. of whole number of persons treated.

Curable forms of mental disease present in 30 per cent.; tuberculosis in 10 per cent.; senile insanity in 30 per cent.; general paralysis in 20 per cent.; coarse brain lesions in 5 per cent. (Compare with Table 3.)

The superintendent writes in his report:—

Work in the chemical laboratory has been continued by Dr. Folin. He was appointed associate professor of chemistry in the Harvard Medical School October 1, but by an arrangement with the school a portion of his time is still given to the hospital.

“During the year the metabolism in general paralysis and the metabolism in fasting have been studied. Preliminary reports on the results obtained have been presented before some scientific societies but have not yet been published. A considerable part of Dr. Folin’s time has been given to the writing of a general review of recent work in biological chemistry for the ‘Journal of the American Chemical Society.’ This paper is not yet quite ready for the printer. During the latter part of the year the attempt to separate methyl amine and ammonia was again taken up together with Mr. Erdmann, but as yet no adequate method has been found.”

In the psychological laboratory the work begun by Dr. Franz has been continued by Dr. F. Lyman Wells, Ph.D., Columbia, 1906, lecturer in psychology, Barnard College, 1907, who has been appointed assistant in pathological psychology. “The research work has dealt mostly with problems in the maximum rate of repeated voluntary movements in normal life and in the psychoses, a study suggested on the pathological side by investigations of tremor by Peterson, Herringham and Sommer, and on the normal side mainly by the work of Desslar, Began, Gilbert and Bliss. While little of strictly clinical significance has as yet been found in the original object of the investigation, the method has proved exceedingly suggestive in the development of a hitherto practically unrecognized means for the study of fatigue.

“The clinical suggestions of the recent work of Peterson and Jung, on the electric resistance of the body as correlated to various mental states, have led to the installation of apparatus for further investigations of this problem with certain elaborations of the technique. This research is as yet only in its preliminary stages. The problem is attracting a good deal of attention in the normal field, and much light on it from various sources may be expected during the year.

“Another department of the work has been directed toward the

development of more standard methods of measurement for ordinary clinical use."

In order to obtain more space for research work, a large room on the second floor of the men's gymnasium has been taken and is being fitted up for this purpose. It should provide for the growing needs of the laboratory for a considerable period.

Following a custom established many years ago, Dr. Packard was given leave of absence of six months to pursue medical studies in the psychological clinic and laboratory of Kraepelin and Alzbeimer in Munich. He sailed October 5. The advantage to him, to other members of the staff and to the medical work of the hospital, can scarcely be overestimated. The clinical men make routine visits and spend time with all the patients in the course of their daily work, and are burdened with many executive details which take time and strength and are distracting. They therefore cannot pursue the long and careful study which some cases demand, and which always is necessary for the advancement of a knowledge of psychiatry. It is now generally recognized that for such work there is need of a man fitted by inclination and education, who will be at liberty to concentrate his attention on any given case as long as may be necessary, instead of being obliged to visit all the patients at regular intervals and talk with their friends. All the information he obtains is at the service of the medical staff. Such work is also a distinct benefit to the patients whose cases are so carefully studied.

From recent rumors of as yet unpublished research it would appear that pathological anatomy may again take a prominent place in the study of mental diseases. For over four years no special work in this field has been done in our laboratories. It has been found to be a disadvantage, because of the necessarily incomplete study of certain cases, of which the clinical side has been well observed. It is recommended that a junior assistant, who wishes to make a special study of neuro-pathology, be engaged for work in the anatomical laboratory.

In the last annual report it was recommended that several cottages be built for the occupancy of married physicians and nurses. During the year a small house with about half an acre of land has been purchased. It is half a mile from the administration house, and cannot well be used for a physician who has executive duty and should be near his work. It can, however, be used for another officer after some necessary repairs have been made. It is still desirable that other cottages be built on the hospital estate for a married physician and nurses.

THE SMALLER PRIVATE INSTITUTIONS

licensed by the Governor to care for the insane number 18. Both mental and non-mental patients are received.

On Oct. 1, 1907, there were 167 patients of both classes, a

decrease of 5 for the year. The insane numbered 86, or 51 per cent. There were 68 admissions of the insane and 59 dismissals during the year.

The general statistics for each institution are set forth in the following tabulation:—

“Bournewood.”—Henry R. Stedman, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1906,	1	1	5	5	12
Admitted during the year,	1	1	4	3	9
Dismissed during the year,	1	1	5	2	9
Number Sept. 30, 1907,	1	1	4	6	12

“The Highlands.”—Frederick W. Russell, M.D.

Number Oct. 1, 1906,	3	-	2	2	7
Admitted during the year,	20	3	1	1	25
Dismissed during the year,	20	2	-	1	23
Number Sept. 30, 1907,	3	1	3	2	9

“Channing Sanitarium.”—Walter Channing, M.D.

Number Oct. 1, 1906,	1	12		12	25
Admitted during the year,		5		6	11
Dismissed during the year,		5		6	11
Number Sept. 30, 1907,	1	12		12	25

Private Hospital.—Eben C. Norton, M.D.

Number Oct. 1, 1906,	1	1		2	4
Admitted during the year,	2		2	3	7
Dismissed during the year,	3	1	1	1	6
Number Sept. 30, 1907,			1	4	5

“Pine Terrace.”—W. F. Robie, M.D.

Number Oct. 1, 1906,	2	4		4	10
Admitted during the year,	12	13		2	27
Dismissed during the year,	13	15		2	30
Number Sept. 30, 1907,	1	2		4	7

"Herbert Hall." — John Merrick Bemis, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1906,	1	3	2	9	15
Admitted during the year,	4	4	8	14	30
Dismissed during the year,	4	5	6	10	25
Number Sept. 30, 1907,	1	2	4	13	20

"Newton Nervine and Sanatorium." — N. Emmons Paine, M.D.

Number Oct. 1, 1906,	6	5	1	4	16
Admitted during the year,	7	34	3	4	48
Dismissed during the year,	10	35	2	5	52
Number Sept. 30, 1907,	3	4	2	3	12

"Locust Grove Asylum." — Miss Alice R. Cooke.

Number Oct. 1, 1906,				3	3
Admitted during the year,					
Dismissed during the year,					
Number Sept. 30, 1907,				3	3

"Cutter Retreat." — William F. Heald, M.D.

Number Oct. 1, 1906,	4	2		1	7
Admitted during the year,	1	3		1	5
Dismissed during the year,	3	2			5
Number Sept. 30, 1907,	2	3		2	7

"Dr. Ring's Sanatorium." — Allan Mott Ring, M.D.

Number Oct. 1, 1906,	7	7		-	14
Admitted during the year,	23	46	-		69
Dismissed during the year,	28	47	-		75
Number Sept. 30, 1907,	2	6		-	8

"Framingham Nervine." — Ellen L. Keith, M.D.

Number Oct. 1, 1906,		10		3	13
Admitted during the year,		23		-	23
Dismissed during the year,		22		2	24
Number Sept. 30, 1907,		11		1	12

"Wellesley Nervine." — Edward H. Wiswall, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1906,	.	.	3	5	
Admitted during the year,	.	.	2	6	12
Dismissed during the year,	.	.	5	4	16
Number Sept. 30, 1907,	.	.	7	-	14

Private Hospital. — J. F. Edgerly, M.D.

Number Oct. 1, 1906,	.	.	1		1
Admitted during the year,	.	.	3	2	5
Dismissed during the year,	.	.	3	2	5
Number Sept. 30, 1907,	.	.	1		1

Private Hospital. — George B. Coon, M.D.

Number Oct. 1, 1906,	.	.	2	1	1	4
Admitted during the year,	.	.		4	2	6
Dismissed during the year,	.	.	2	2	-	4
Number Sept. 30, 1907,	.	.	-	3	3	6

"Highland Hall." — Samuel L. Eaton, M.D.

Number Oct. 1, 1906,	.	.	5			5
Admitted during the year,	.	.	12	-		12
Dismissed during the year,	.	.	11			11
Number Sept. 30, 1907,	.	.	-	6		6

"Dr. Reeves' Nervine." — Harriet E. Reeves, M.D.

Number Oct. 1, 1906,	.	.			4	4
Admitted during the year,	.	.	-	3	1	4
Dismissed during the year,	.	.	1		3	4
Number Sept. 30, 1907,	.	.		2	2	4

"Wheeler Sanitarium." — Mrs. Maria H. Paul.

Number Oct. 1, 1906,	.	.		1	5	6
Admitted during the year,	.	.	1		1	2
Dismissed during the year,	.	.	-		2	2
Number Sept. 30, 1907,	.	.	1	1	4	6

"Arlington Health Resort." — Arthur H. Ring, M.D.

	SANE.		INSANE.		Totals.
	Men.	Women.	Men.	Women.	
Number Oct. 1, 1906,	3	5			8
Admitted during the year,	9	24		2	35
Dismissed during the year,	10	23	-		33
Number Sept. 30, 1907,	2	6		2	10

Total, Smaller Private Establishments.

Number Oct. 1, 1906,	34	61	12	65	172
Admitted during the year,	81	181	23	45	330
Dismissed during the year,	99	177	17	42	335
Number Sept. 30, 1907,	16	65	18	68	167

FAMILY CARE OF THE INSANE UNDER THE STATE BOARD.

First patient boarded in a family, Aug. 10, 1885. Since placed, 887 different patients.

Number in families Oct. 1, 1907, 275; 13 men, 262 women.

Placed during the year, 68 persons; a decrease of 25.

Daily average number for the year, 269; an increase of 21.

Passed out of public support:—

During the year, 21; a decrease of 4, viz.: discharged self-supporting, 5; discharged to care of friends, none; self-supporting on visit, 8; self-supporting in families, 7; boarded with friends without public expense, 1; became private patients, none.

Since 1885, 187 different patients, viz.: discharged self-supporting, 81; discharged to care of friends, 31; self-supporting on visit, 8; self-supporting in families, 35; boarded with friends without public expense, 16; became private patients, 16.

Reappeared under public support:—

During the year, 1; since 1885, 40; 21 per cent.

Number of families having patients, 128; a decrease of 10; 59 families having 1 patient; 26 families, 2; 12 families, 3; 27 families, 4; 4 families, 5.

Number of towns in which patients are boarded, 59, same as the previous year. Largest number of patients in any one town, 69; of families, 22.

The general statistics for the year are:—

	1907.			INCREASE FOR THE YEAR.		
	Men.	Women.	Total.	Men.	Women.	Totals.
Remaining Sept. 30, 1906,	13	272	285	1	31	32
Admitted within the year,	5	74	79	11	171	181
By transfer from institutions,	4	64	68	21	231	251
From visit,	-	1	1	-	1	1
From escape,	-	-	-	-	11	11
Nominally at end of visit, for discharge,	1	5	6	1	3	4
Nominally from escape, for discharge,	-	4	4	-	3	3
Whole number of cases within the year,	18	346	364	-	14	14
Dismissed within the year,	5	84	89	-	24	24
Viz.: Discharged,	2	15	17	1	7	8
Capable of self-support,	2	14	16	2	7	9
Requiring further care,	-	-	-	11	11	21
Not insane,	-	1	1	-	1	1
Transferred to institutions,	1	53	54	1	12	13
Unsuitable,	-	17	17	-	7	7
Temporarily,	1	25	26	1	6	7
Ill,	-	11	11	-	11	11
Died,	1	5	6	11	1	.
On visit Sept. 30, 1907,	1	11	12	-	5	5
Escaped,	-	-	-	11	11	21
Remaining Sept. 30, 1907,	13	262	275	-	101	101
Viz.: Supported by the State,	8	226	234	11	71	81
Reimbursing,	-	7	7	-	2	2
Private,	1	12	13	-	41	41
Self-supporting,	2	13	15	1	11	.
Living with friends without public aid,	2	4	6	-	-	-
Number of different persons within the year,	17	325	342	-	9	9
Number of different persons admitted,	4	65	69	11	221	231
Number of different persons dismissed,	4	74	78	11	16	151
Daily average number,	12.83	256.49	269.32	1.00	20.34	21.34
State,	8.56	221.47	230.03	1.88	15.51	17.39
Reimbursing,	.19	6.00	6.19	.311	3.19	2.88
Private,	1.00	12.78	13.78	.411	.181	.591
Self-supporting,	1.08	11.82	12.90	.161	.77	.61
Living with friends without public aid,	2.00	4.42	6.42	-	1.05	1.05

The total and weekly per capita expenditures of the State on account of patients in private families for the year ending Nov. 30, 1907, and since Oct. 1, 1889, are shown as follows:—

	Fiscal Year ending Nov. 30, 1907.	Since 1889.
Payments for board,	\$35,534 51	\$387,148 47
Average number of patients exclusive of private patients,	254.60	178.77
Weekly per capita cost of board,	\$2 68	\$2 31
Payments for extra clothing not included in board rate, . . .	160 15	1,412 94
Payments for medical attendance, etc., not included in board rate.	297 77	3,224 20
Weekly per capita cost of such expenses outside of board rate.	.03	.03
Weekly per capita cost of support (being cost of board, clothing, medical attendance, etc.).	2 71	2 34
Payments for supervision (being transportation, salaries and expenses of visitors).	5,346 93	45,564 71
Average number of patients,	267.81	188.98
Weekly per capita cost of supervision,	\$0 38	\$0 26
Weekly per capita cost of support and supervision, . . .	3 09	2 60

First Admissions.

Of the 53 such admissions, 16 had been in institutions continuously for less than a year; 8, one to two years; 6, two to three years; 5, three to four years; 2, four to five years; 4, five to six years; 1, seven to eight years; 1, eight to nine years; 1, nine to ten years; 3, ten to fifteen years; 1, fifteen to twenty years; 3, twenty to twenty-five years; 2, twenty-five to thirty years. The average hospital residence was five years, four months. Of the 24 persons so residing less than two years, 7 had been previously insane inmates of institutions.

Of the 53 persons first admitted, 9 were returned to institutions; the remainder were successfully boarded, of whom 8 improved mentally, 4 improved mentally and physically, 1 made great physical improvement and 3 were discharged.

Readmissions.

Of the 15 such cases, 10 were readmitted for the first time, 4 for the third, 1 for the fifth. Eleven had remained in institutions after return from boarding less than a year; 4, one to five years; the average duration being eleven months.

Three had been returned to institutions as unsuitable, after boarding an average of one year, nine months; 2 as ill, after boarding an average of one year, nine months; 10 temporarily, after boarding an average of two years, nine months.

Discharges.

Seventeen cases were discharged; 9, after boarding less than a year; 3, one to two years; 3, two to three years; 1, three to four years; 1, four to five years.

Two had been continuously inmates of institutions prior to boarding out eight to nine years; 1, seven to eight years; 1, five to six years; 2, four to five years; 1, three to four years; 2, two to three years; 4, one to two years; 4, less than a year.

Sixteen were discharged self-supporting; 1, not insane.

In addition, 12 patients were on visit Oct. 1, 1907.

Transfers to Institutions.

Fifty-four cases were transferred to institutions, 17 as unsuitable, 11 physically ill, 26 temporarily.

Of the 17 so transferred as unsuitable, 8 had boarded less than a year; 4, one to two years; 1, two to three years; 1, three to four years; 1, four to five years; 2, five to six years; the average duration being one year, eight months. Nine had been tried in one family, 5 in two, 2 in three, 1 in seven.

Of the 11 so transferred as ill, 2 had boarded less than a year; 3, one to two years; 2, three to four years; 1, five to six years; 2, six to seven years; 1, sixteen to seventeen years; the average duration being four years, four months. Six remained in institutions; 2 died there within three months, 1 within eight months; 2 were readmitted to family care within the year.

Of the 26 so transferred temporarily, 15 had boarded less than a year; 3, one to two years; 3, two to three years; 3, three to four years; 1, eleven to twelve years; 1, twelve to thirteen years. Eight were readmitted to family care within the year.

Transfers between Families.

Incompatibility,	8
Request of caretaker (patient troublesome),	30
Request of caretaker (patient not useful),	3
Death of caretaker,	9
Illness of caretaker,	3
Caretaker's removal,	6
Caretaker unsuitable,	3
Caretaker giving up patients,	5
Request of patient,	8
For better accommodations,	7
For closer supervision,	1
To less retired situation,	1
To be nearer friends,	2
To go to friends,	3
Too frequent visitation of relatives,	1
To make room for another patient,	8
To become self-supporting,	6
For reduction of board,	3
To be nearer employment,	1
To receive higher wages,	1
To places of patient's selection,	4

Deaths.

Six patients died; 1 after boarding less than a year; 1, two to three years; 2, three to four years; 1, six to seven years; 1, eighteen years.

In addition, 3 died in institutions within six months after returning.

Families.

The 275 patients remaining Sept. 30, 1907, were in 128 families,—a loss of 10. Fifty-nine had 1 patient each; 26 families, 2; 12 families, 3; 27 families, 4; 4 families, 5.

Sixteen of these patients were with relatives, 6 with interested friends, 3 self-supporting in families of their own choosing, 1 in a family in each case.

Fifty-five new families applied for patients, 9 being rejected. Twenty-two new families were given patients within the year.

Two families became unsuitable and patients were with-

drawn. Nine other families voluntarily relinquished their patients, 2 because of low rate of remuneration, 3 because of change of residence, 2 because of illness and 2 died.

Cities and Towns.

The patients remaining Oct. 1, 1907, resided in 59 cities and towns:—

Amesbury, 1; Andover, 1; Arlington, 1; Ashfield, 4; Bellingham, 1; Beverly, 2; Billerica, 5; Boston, 4; Brookfield, 4; Cambridge, 1; Chelmsford, 2; Chelsea, 1; Cummington, 1; Danvers, 1; Dennis, 1; Dover, 7; Dunstable, 3; Easthampton, 2; Easton, 6; Goshen, 2; Haverhill, 1; Hawley, 4; Holliston, 20; Leicester, 4; Lowell, 3; Lynnfield, 1; Malden, 2; Medway, 1; Melrose, 3; Needham, 4; New Bedford, 1; New Braintree, 1; Newton, 1; Northampton, 1; Northborough, 2; North Brookfield, 15; Norton, 7; Peabody, 1; Petersham, 1; Plymouth, 1; Prescott, 1; Reading, 4; Revere, 1; Royalston, 7; Salem, 2; Somerville, 4; Southborough, 5; Sterling, 1; Tannton, 9; Tewksbury, 69; Tyngsborough, 1; Upton, 1; Walpole, 9; Westborough, 12; Whitman, 1; Williamsburg, 7; Wilmington, 11; Woburn, 5; Worcester, 1.

FAMILY CARE OF THE INSANE UNDER TRUSTEES.

The trustees of institutions were authorized, by chapter 458 of the Acts of 1905, to place their patients in the care of private families under substantially the same conditions as the State Board.

First patient boarded in a family, June 13, 1905. Since placed, 18 different patients.

Number in families Oct. 1, 1907, 8; 0 men, 8 women.

Placed during the year, 2 persons,—a decrease of 9.

Number of families having patients, 5,—a decrease of 1; 3 families having 1 patient; 1 family, 2; 1 family, 3.

Number of towns in which patients are boarded, 4,—a decrease of 1. Largest number of patients in any one town, 4; of families, 2.

The general statistics for each institution for the year are:—

		Men.	Women.	Totals.
Remaining Sept. 30, 1906,	.	.	10	10
Northampton Hospital,	.	.	9	9
Westborough Hospital,	.	.	1	1
Admitted within the year,	.	.	2	2
Northampton Hospital,	.	.	1	1
Westborough Hospital,	.	.	1	1
Whole number of cases within the year,	.	.	12	12
Dismissed within the year,	.	.	4	4
Northampton Hospital,	.	.	3	3
Westborough Hospital,	.	.	1	1
Viz.: Returned to hospital,	.	.	2	2
Northampton,	.	.	1	1
Temporarily,	.	.	1	1
Westborough,	.	.	1	1
Unsuitable,	.	.	1	1
Transferred to State Board,	.	.	2	2
Northampton,	.	.	2	2
Remaining Sept. 30, 1907,	.	.	8	8
Northampton Hospital,	.	.	7	7
Westborough Hospital,	.	.	1	1
Supported by the State,	.	.	4	4
Northampton Hospital,	.	.	4	4
Private,	.	.	3	3
Northampton Hospital,	.	.	2	2
Westborough Hospital,	.	.	1	1
Self-supporting,	.	.	1	1
Northampton Hospital,	.	.	1	1
Number of different persons within the year,	.	.	12	12
Number of different persons admitted,	.	.	2	2
Number of different persons dismissed,	.	.	4	4
Daily average number,..	.	.	9.32	9.32
State,	.	.	5.10	5.10
Northampton,	.	.	4.92	4.92
Westborough,	.	.	.18	.18
Reimbursing,	.	.	.22	.22
Northampton,	.	.	.22	.22
Private,	.	.	3.00	3.00
Northampton,	.	.	2.00	2.00
Westborough,	.	.	1.00	1.00
Self-supporting,	.	.	1.00	1.00
Northampton,	.	.	1.00	1.00

NEW LEGISLATION.

General legislation relative to the institutions and persons under the supervision of the Board was enacted by the Legislature of 1907, as follows:—

The essential provisions of chapter 520 are:—

(1) The requirement that preliminary plans, specifications and at least one estimate of cost of construction of buildings at the institutions be submitted to the State Board on or before November 1 for its approval or modification.

(2) Authorization of the trustees, after the State Board's approval, to incur the expense of preparing working plans and specifications and estimates of the cost, and of the State Board to employ expert assistance in their consideration.

(3) The submission of such working plans and specifications to the Legislature, with the recommendations of the State Board.

(4) Filing copies of such working plans and specifications with the State Board, and prohibition of their modification without its written approval.

(5) Public advertisement for competitive bids for all such contract work.

ACTS OF 1906, CHAPTER 520.

AN ACT RELATIVE TO THE CONSTRUCTION AND IMPROVEMENT OF BUILDINGS AT STATE AND OTHER INSTITUTIONS.

Be it enacted, etc., as follows:

SECTION 1. Preliminary plans, specifications and at least one reliable estimate of the cost of any new construction, including plumbing, heating, lighting, ventilating and equipment, or alteration or repair of existing construction at an expense exceeding two thousand dollars, for which it is intended to petition the general court for an appropriation of money, shall be submitted, on or before November first next preceding the legislative session in which it is intended to request the consideration thereof, to the state board which has supervision of the institution, public or private, for which such work is proposed. Said state board may require such modifications thereof and additions thereto and such additional information as it may deem necessary.

SECTION 2. After the approval of said preliminary plans and specifications by said state board, working plans, specifications and at least one reliable estimate of the cost of the proposed work shall be procured by the trustees of the institution, and shall be submitted on or before said November first to said state board for its approval. Said state

board may employ expert assistance in its consideration thereof, and may recommend such modifications of and additions to said working plans and specifications as it may deem necessary, and if said working plans, specifications and estimate shall be submitted to the legislature without its approval, it shall recommend to the committees by whom such new construction, alteration or repairs shall be considered such modifications and additions as it may deem advisable, with its reasons therefor. All work to be done by persons regularly employed at the institution shall be excepted from the provisions of this section.

SECTION 3. Copies of said working plans and specifications relative to work for which an appropriation has been made shall be filed with said state board, and shall not be modified except with its approval in writing. The trustees shall solicit bids for the performance of such work by advertising in a reasonable number of newspapers, and shall award the contract to the lowest responsible and eligible bidder; but no contract shall be awarded for a sum exceeding the appropriation available therefor. Any petition subject to the provisions of this act and presented without compliance therewith shall be referred to the next general court, unless it shall be admitted for immediate consideration under the rules governing the admission of new business after the expiration of the time limit for its introduction.

SECTION 4. Any petition for an appropriation of money by the Commonwealth for such new construction, alteration or repair at an institution which is not under the supervision of a state board shall be accompanied by working plans, specifications, and at least three reliable estimates of its cost for submission to the committees of the legislature by whom it shall be considered; otherwise it shall be referred to the next general court, according to the provisions of section three.

SECTION 5. To meet the expenses incurred under the provisions of section two on account of state institutions, and on account of the Massachusetts School for the Feeble-Minded and the Hospital Cottages for Children, a sum not exceeding two thousand dollars may annually be expended. Bills of such expenses shall not be paid until they have been approved by said state board.

SECTION 6. This act shall take effect upon its passage. [Approved June 15, 1907.]

The essential provisions of chapter 139 are:—

(1) Requirement of the State Auditor to audit, at least once in each year, the accounts of all State officials, boards and institutions receiving moneys payable to the State.

(2) His authorization to prescribe the form and manner of keeping such accounts.

ACTS OF 1907, CHAPTER 139.

AN ACT RELATIVE TO THE POWERS AND DUTIES OF THE AUDITOR OF ACCOUNTS.

Be it enacted, etc., as follows:

SECTION 1. Chapter six of the Revised Laws is hereby amended by striking out section twenty-one and inserting in place thereof the following:—*Section 21.* He shall annually examine the books, accounts and vouchers of the treasurer and receiver general. He shall at least once in each year, and oftener in his discretion, audit the accounts of all state officials, boards and institutions receiving moneys to be turned into the treasury of the Commonwealth, which accounts shall be kept in such form and manner as he shall prescribe. His own books and accounts shall be subject at any time to such examination as the governor and council or the general court may order. He shall comply with any regulations relative to the duties of his office which may be made in writing by the governor and council and which are not inconsistent with the provisions of this chapter.

SECTION 2. Said chapter six is hereby further amended by striking out section fourteen and inserting in place thereof the following:—*Section 14.* He shall receive an annual salary of thirty-five hundred dollars. He may employ in his office a first clerk at a salary of twenty-five hundred dollars a year, a second clerk at a salary of twenty-two hundred dollars a year, additional clerks, examiners, stenographers and such additional clerical assistance as may be necessary, at an expense not exceeding fourteen thousand dollars a year, and a messenger at a salary of not more than nine hundred dollars a year. If by reason of sickness, absence or other cause the auditor is temporarily unable to perform the duties of his office, the first clerk in his office shall act as his deputy and perform the duties of the auditor until such disability ceases.

SECTION 3. All acts and parts of acts inconsistent with this act are hereby repealed.

SECTION 4. This act shall take effect upon its passage. [Approved February 21, 1907.]

The essential provisions of chapter 269, as interpreted by the Attorney-General, prohibits requesting or requiring any employees, except nurses, of such institutions working more than forty-eight hours a week or longer than eight hours in any one day, excepting in extraordinary emergency.

ACTS OF 1907, CHAPTER 269.

AN ACT RELATIVE TO THE HOURS OF LABOR OF WORKMEN, MECHANICS AND ENGINEERS.

Be it enacted, etc., as follows:

SECTION 1. Section one of chapter five hundred and seventeen of the acts of the year nineteen hundred and six is hereby amended by inserting after the word "Laws", in the sixth line, the following:—No laborer, workman or mechanic so employed shall be requested or required to work more than eight hours in any one calendar day or more than forty-eight hours in any one week except in cases of extraordinary emergency. Only a case of danger to property, to life, to public safety or to public health shall be considered a case of extraordinary emergency within the meaning of this section. Engineers shall be considered mechanics within the meaning of this act,—and by adding at the end of the section the words:—Threat of loss of employment or threat to obstruct or prevent the obtaining of employment, or threat to refrain from employing in the future shall be considered requiring, within the meaning of this section,—so as to read as follows:—*Section 1.* Eight hours shall constitute a day's work for all laborers, workmen and mechanics now or hereafter employed by or on behalf of the Commonwealth, or of any county therein, or of any city or town which has accepted the provisions of section twenty of chapter one hundred and six of the Revised Laws. No laborer, workman or mechanic so employed shall be requested or required to work more than eight hours in any one calendar day or more than forty-eight hours in any one week except in cases of extraordinary emergency. Only a case of danger to property, to life, to public safety or to public health shall be considered a case of extraordinary emergency within the meaning of this section. Engineers shall be considered mechanics within the meaning of this act. But in cases where a Saturday half-holiday is given the hours of labor upon the other working days of the week may be increased sufficiently to make a total of forty-eight hours for the week's work. Threat of loss of employment or threat to obstruct or prevent the obtaining of employment, or threat to refrain from employing in the future shall be considered requiring, within the meaning of this section.

SECTION 2. Section two of said chapter five hundred and seventeen is hereby amended by inserting after the word "mechanic", in the eighth line, the words:—working within this Commonwealth,—and by inserting after the word "be", in the eleventh line, the words:—requested or,—and by adding at the end of the section the words:—and every such contract which does not contain this stipulation shall be null and void,—so as to read as follows:—*Section 2.* Every contract, excluding contracts for the purchase of material or supplies, to which the Commonwealth, or of any county therein, or of any city or town

which has accepted the provisions of section twenty of chapter one hundred and six of the Revised Laws, is a party which may involve the employment of laborers, workmen or mechanics shall contain a stipulation that no laborer, workman or mechanic working within this Commonwealth in the employ of the contractor, sub-contractor or other person doing or contracting to do the whole or a part of the work contemplated by the contract shall be requested or required to work more than eight hours in any one calendar day and every such contract which does not contain this stipulation shall be null and void.

SECTION 3. Section four of said chapter five hundred and seventeen is hereby amended by inserting before the word "Any", in the first line, the words:—Any person or contractor or sub-contractor, or any agent or person acting on behalf of any contractor or sub-contractor, or,—so as to read as follows:—*Section 4.* Any person or contractor or sub-contractor, or any agent or person acting on behalf of any contractor or sub-contractor, or any agent or official of the Commonwealth or of any county, city or town who violates any provision of this act shall be subject to a penalty of fifty dollars for each offence. [Approved April 3, 1907.

The above act is amended in chapter 570 so as to exempt from its provisions persons employed in any State, county or municipal institution, on the farm, in the care of the grounds, in the stable, in the domestic or kitchen and dining-room service or in storerooms and offices.

ACTS OF 1907, CHAPTER 570.

AN ACT RELATIVE TO THE HOURS OF LABOR OF LABORERS, WORKMEN AND MECHANICS.

Be it enacted, etc., as follows:

SECTION 1. Section one of chapter five hundred and seventeen of the acts of the year nineteen hundred and six, as amended by section one of chapter two hundred and sixty-nine of the acts of the year nineteen hundred and seven, is hereby further amended by striking out the word "Saturday", in the thirteenth line, and inserting in place thereof the word:— weekly,— and by adding at the end of the section the words:— This section shall not apply to persons employed in any state, county or municipal institution, on the farm, or in the care of the grounds, in the stable, in the domestic or kitchen and dining-room service, or in storerooms and offices,— so as to read as follows:—*Section 1.* Eight hours shall constitute a day's work for all laborers, workmen and mechanics now or hereafter employed by or on behalf of the Commonwealth, or of any county therein, or of any city or town which has accepted the provisions of section twenty of chapter one hundred and

six of the Revised Laws. No laborer, workman or mechanic so employed shall be requested or required to work more than eight hours in any one calendar day or more than forty-eight hours in any one week except in cases of extraordinary emergency. Only a case of danger to property, to life, to public safety or to public health shall be considered a case of extraordinary emergency within the meaning of this section. Engineers shall be considered mechanics within the meaning of this act. But in cases where a weekly half-holiday is given the hours of labor upon the other working days of the week may be increased sufficiently to make a total of forty-eight hours for the week's work. Threat of loss of employment or threat to obstruct or prevent the obtaining of employment, or threat to refrain from employing in the future shall be considered requiring, within the meaning of this section. This section shall not apply to persons employed in any state, county or municipal institution, on the farm, or in the care of the grounds, in the stable, in the domestic or kitchen and dining-room service, or in storerooms and offices.

SECTION 2. This act shall take effect upon its passage. [Approved June 28, 1907.]

The essential provisions of chapter 489 impose upon the judge of probate for the county of Middlesex the duty of determining by judicial inquiry, at the request of the trustees and the State Board of Insanity, whether certain inmates of the Massachusetts School for the Feeble-minded, who have reached the limit of school age or are incapable of further benefit by school instruction, are or are not feeble-minded, and authorizes said judge to commit such to said school or discharge therefrom at his discretion.

ACTS OF 1907, CHAPTER 489.

AN ACT RELATIVE TO INMATES OF THE MASSACHUSETTS SCHOOL FOR THE
FEEBLE-MINDED.

Be it enacted, etc., as follows:

SECTION 1. Chapter three hundred and nine of the acts of the year nineteen hundred and six is hereby amended by striking out section one and inserting in place thereof the following:—*Section 1.* If an inmate of the Massachusetts School for the Feeble-Minded, whether by commitment or otherwise, shall have reached the limit of school age, or, in the judgment of the trustees, is incapable of being further benefited by school instruction; or, if the question of the commitment to or continuance in said school of any inmate, including inmates who may have been transferred from one department of said school to another under the provisions of section one hundred and sixteen of chapter

eighty-seven of the Revised Laws, is, in the opinion of the trustees and of the state board of insanity, a proper subject for judicial inquiry, the probate court for the county of Middlesex, upon the petition in writing of said trustees, or of said board or of any member of either body, and after such notice as the court may order, may, in its discretion, order such inmate to be brought before the court, and shall determine whether or not he is a feeble-minded person, and may commit him to said school or to either department thereof, or may order him to be discharged therefrom.

SECTION 2. This act shall not be construed to impair the power given to said trustees by section one hundred and sixteen of chapter eighty-seven of the Revised Laws to discharge any inmate of said school or of any department thereof.

SECTION 3. This act shall take effect upon its passage. [Approved June 11, 1907.]

ACTS OF 1907, CHAPTER 421.

AN ACT TO ESTABLISH THE NAME OF THE WRENTHAM STATE SCHOOL.
Be it enacted, etc., as follows:

SECTION 1. The school for feeble-minded, established under chapter five hundred and eight of the acts of the year nineteen hundred and six, shall be known as Wrentham State School.

SECTION 2. This act shall take effect upon its passage. [Approved May 16, 1907.]

Chapter 432 reduces the age limit for admission to the Massachusetts Hospital for Epileptics from fourteen to ten years.

ACTS OF 1907, CHAPTER 432.

AN ACT RELATIVE TO THE AGE OF EPILEPTICS ELIGIBLE FOR ADMISSION
TO THE MASSACHUSETTS HOSPITAL FOR EPILEPTICS.

Be it enacted, etc., as follows:

SECTION 1. A person of the age of ten years or over who is subject to epilepsy, if he is not a criminal, inebriate or violently insane, may be received for care and treatment in the Massachusetts hospital for epileptics by the trustees thereof or may, if insane, be committed thereto. The provisions of section sixty-six of chapter eighty-seven of the Revised Laws, as amended by chapter three hundred and fifty-two of the acts of the year nineteen hundred and six, and of sections sixty-seven and sixty-eight of said chapter eighty-seven shall apply to epileptics of the age of ten years or over.

SECTION 2. All acts and parts of acts inconsistent herewith are hereby repealed.

SECTION 3. This act shall take effect upon its passage. [Approved May 17, 1907.]

ACTS OF 1907, CHAPTER 84.

RESOLVE TO PROVIDE FOR AN INVESTIGATION OF THE WATER SUPPLY SYSTEM OF THE MEDFIELD INSANE ASYLUM.

Resolved, That the trustees of the Medfield insane asylum are hereby authorized to expend such sum as may be necessary, not exceeding two thousand dollars, in making an investigation of the present water supply of said asylum and in finding a substitute or supplementary supply accordingly as the needs of the asylum may require. The trustees shall report to the next general court the result of their investigation, with such recommendations as they may deem advisable. [Approved May 17, 1907.]

ACTS OF 1907, CHAPTER 525.

AN ACT TO AUTHORIZE THE TRUSTEES OF THE WORCESTER INSANE HOSPITAL TO GRANT TO THE CITY OF WORCESTER THE RIGHT TO USE AND OCCUPY CERTAIN LAND FOR PUBLIC PURPOSES.

Be it enacted, etc., as follows:

SECTION 1. The trustees of the Worcester insane hospital are hereby authorized to enter into an agreement with the park commissioners of the city of Worcester whereby the land of said trustees in said city lying east of Lake Boulevard and west of Lake Quinsigamond may be used for park purposes, subject to all the provisions of law now or hereafter in force relative to public parks, and the care, management and control of said land is hereby entrusted to said commissioners under such regulations and restrictions as may be agreed upon: *provided, however*, that no buildings or structures be erected on said land, except with the joint consent and approval of said trustees and said commissioners and then only for public purposes.

SECTION 2. This act shall take effect upon its passage. [Approved June 15, 1907.]

ACTS OF 1907, CHAPTER 532.

AN ACT TO AUTHORIZE THE TRUSTEES OF THE WORCESTER INSANE HOSPITAL TO RELEASE A CERTAIN CLAIM AGAINST THE CITY OF WORCESTER.

Be it enacted, etc., as follows:

SECTION 1. The trustees of the Worcester insane hospital are hereby authorized to release without payment of compensation the claim which they have against the city of Worcester for damages resulting from the taking by said city of certain land belonging to said trustees for the purpose of widening Shrewsbury street in accordance with a decree of the city council of said city approved by the mayor thereof on the fourteenth day of October, nineteen hundred and five.

SECTION 2. This act shall take effect upon its passage. [Approved June 19, 1907.]

ACTS OF 1907, CHAPTER 407.

AN ACT TO AUTHORIZE THE SALE AND PURCHASE BY THE TRUSTEES OF THE STATE HOSPITAL AND STATE FARM OF CERTAIN LANDS IN THE TOWN OF BRIDGEWATER.

Be it enacted, etc., as follows:

SECTION 1. The trustees of the state hospital and state farm, or a majority thereof, are hereby authorized to sell and convey a parcel of land on Titicut street in the town of Bridgewater, now owned by the Commonwealth and containing about eighty-two and eight hundredths square rods, and in consideration of such sale and conveyance to acquire for the Commonwealth and in its name a parcel of land on Conant street in said town containing about seventy and seven tenths square rods.

SECTION 2. This act shall take effect upon its passage. [Approved May 14, 1907.]

SPECIAL APPROPRIATIONS.

	1907.	Nine Years, ending 1907.
<i>Worcester Hospital.</i>		
Alterations in the old building over the coal pocket for bathrooms and workshops, and the purchase and installation of bathing apparatus,	\$6,000 00	
Construction of an iron staircase and elevator to the fourth story of the main building,	7,600 00	
[Resolves, chapter 113.]	\$13,600 00	\$249,098 44
<i>Taunton Hospital.</i>		
		\$322,805 00
<i>Northampton Hospital.</i>		
Plumbing fixtures and material,	\$2,000 00	
Electric lights on the hospital grounds,	1,200 00	
Purchase of cows,	2,000 00	
Machinery for the bakery,	1,000 00	
Lumber for an ice house,	700 00	
Construction of a hothouse,	2,100 00	
[Resolves, chapter 92.]	\$9,000 00	\$217,300 00
<i>Danvers Hospital.</i>		
Construction of water tower and improvement of fire service,	\$15,000 00	
Construction of two fireproof sun rooms and fire-escapes as an addition to ward buildings,	20,000 00	
Purchase of land,	3,800 00	
[Resolves, chapter 100.]	\$38,800 00	\$362,850 00
<i>Westborough Hospital.</i>		
Extension of the water system to connect with the town of Westborough water supply and for improvement of the hospital fire service,	\$5,400 00	
Constructing and equipping new buildings for bakery, storage of supplies and refrigerating plant,	30,000 00	
Purchase of land, buildings and chattels thereon and improvement thereof,	15,000 00	
[Acts, chapter 555, section 2.]		
Purchase of stock to replace that lost by the burning of the barn,	1,500 00	
[Resolves, chapter 114.]	\$49,900 00	\$427,950 00

SPECIAL APPROPRIATIONS—*Concluded.*

	1907.	Nine Years, ending 1907.
<i>Worcester Asylum.</i>		
Road-making outfit,	\$3,000 00	
Sewage disposal at the colony,	2,000 00	
Water supply at the colony,	5,500 00	
[Resolves, chapter 88.]		
	\$10,500 00	\$455,000 00
<i>Medfield Asylum.</i>		
Investigation of present water supply,	\$2,000 00	\$545,500 00
[Resolves, chapter 84.]		
<i>State Colony.</i>		
Construction of a stable,	\$6,500 00	\$473,950 00
[Resolves, chapter 95.]		
<i>State Hospital,</i>		\$120,000 00
<i>Asylum for Insane Criminals.</i>		
Extension of the attendants' building,	\$10,000 00	
Furnishings for the industrial buildings,	5,000 00	
[Acts, chapter 555, section 2.]		
	\$15,000 00	\$235,000 00
<i>Hospital for Epileptics.</i>		
Constructing silos,	\$1,100 00	
Alterations in old building, purchase and erection of feed water heater and bakery machinery and minor improvements,	3,400 00	
Erection of a stable for horses,	6,000 00	
[Resolves, chapter 91.]		
	\$10,500 00	\$418,800 00
<i>Massachusetts School for the Feeble-minded.</i>		
Addition to manual training building at Waltham,	\$24,000 00	
Additions to the hospital group of buildings at Waltham,	10,000 00	
Additions to the laundry at Waltham,	4,000 00	
Replacing the wooden stairways in the boys' three-story dormitory at Waltham with iron stairways,	2,500 00	
Electric lights for the farm group of buildings at Waltham,	1,100 00	
Suppression of the brown tail and gypsy moths in the Waltham property,	5,000 00	
Constructing and furnishing two wooden houses for male employees at Waltham,	3,000 00	
[Resolves, chapter 89.]		
	\$49,600 00	\$537,100 00
<i>Wrentham State School.</i>		
New construction, furnishing and equipping and other work made necessary by the growth of the institution,	\$25,000 00	\$75,000 00
[Acts, chapter 555, section 2.]		
<i>Foxborough State Hospital.</i>		
Construction of coal pockets,	\$4,700 00	\$173,150 00
[Resolves, chapter 90.]		

SUMMARY OF APPROPRIATIONS.

	1907.	Nine Years, ending 1907.
<i>Insane.</i>		
Constructing, furnishing and equipping buildings for patients and nurses,	\$10,000 00	\$2,099,150 00
Number of patients provided for,	-	2,857
Average per capita cost,	-	\$589 45
Number of nurses provided for,	18	627
Average per capita cost,	\$555 56	\$662 04
Patients and nurses provided for,	18	3,484
Average per capita cost,	\$555 56	\$602 51
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	143,683 00	1,657,336 44
Total,	\$153,683 00	\$3,756,486 44
<i>Feeble-minded.</i>		
Constructing, furnishing and equipping buildings for patients and nurses,	\$28,500 00	\$345,500 00
Number of patients provided for,	70	740
Average per capita cost,	\$407 14	\$385 81
Number of nurses provided for,	-	82
Average per capita cost,	-	\$731 71
Patients and nurses provided for,	70	822
Average per capita cost,	\$407 14	\$420 32
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	46,100 00	266,600 00
Total,	\$74,600 00	\$612,100 00
<i>Epileptic.</i>		
Constructing, furnishing and equipping buildings for patients and nurses,	-	\$152,550 00
Number of patients provided for,	-	192
Average per capita cost,	-	\$732 03
Number of nurses provided for,	-	27
Average per capita cost,	-	\$444 44
Patients and nurses provided for,	-	219
Average per capita cost,	-	\$696 57
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	5,250 00	56,850 00
Total,	\$5,250 00	\$209,400 00
<i>Inebriate.</i>		
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	\$1,567 00	\$35,517 00
<i>All Classes.</i>		
Constructing, furnishing and equipping buildings for patients and nurses,	\$38,500 00	\$2,597,200 00
Number of patients provided for,	70	3,789
Average per capita cost,	\$407 14	\$566 90
Number of nurses provided for,	18	736
Average per capita cost,	\$555 56	\$661 82
Patients and nurses provided for,	88	4,525
Average per capita cost,	\$437 50	\$573 97
Land, buildings for officers and employees and for administrative purposes, including furnishing and equipment, improvements and repairs,	196,600 00	2,016,303 44
Total,	\$235,100 00	\$4,613,503 44
Average amount appropriated annually,	.	\$512,611 49

THE PERSONNEL OF THE BOARD

is changed by the resignations of Mr. Seward W. Jones and Dr. James B. Ayer. The Board's appreciation of their valuable services to the Commonwealth is expressed in the following resolutions, which are spread upon its records:—

Whereas, His election to the Governor's Council has necessitated the resignation of our colleague, Seward W. Jones, from the State Board of Insanity, of which he has been a member since December, 1902,—

Resolved, That we express our regret in breaking the pleasant association with him and the high esteem in which we hold his valuable services to the Commonwealth.

His keen business insight, impartial consideration of every question, and generous conception of his duty to all the interests under supervision, made him most helpful in the Board's deliberations and very acceptable to the institutions.

We tender him our sincere regard and best wishes for his personal welfare, with the expectation of further honors awaiting him in new fields of public service.

Whereas, Our colleague, Dr. James B. Ayer, has deemed it necessary to decline reappointment to the Board, of which he has been a devoted member for the last five years, be it —

Resolved, That we express our sincere regret in severing our pleasant official relations, and our keen appreciation of the rare fidelity with which he served the Commonwealth, of his deep interest in the work of the Board and the institutions, especially in their medical and scientific activities, and of his unfailing courtesy and kindness in all our associations with him, and we assure him of our high personal esteem and best wishes for his welfare and continued usefulness.

The Governor appointed in their places Mr. William F. Whittemore and Dr. Herbert B. Howard, both of Boston. Dr. Howard was one of the original members of the Board.

Dr. John E. Fish, after a very efficient service of six years as medical director of family care of the harmless insane, resigned to accept the superintendency of the Massachusetts Hospital-School at Canton, Mass. He was succeeded by Dr. Winfred H. Lane, formerly in the medical service of the Taunton Hospital, and later in general practice for several years.

Twenty Board meetings were held during the hospital year. Ten conferences with the trustees and superintendents of the

different institutions were arranged, to promote harmonious action with relation to appropriations, construction and general policy.

Thirty-five visits of inspection to institutions were made by the Board, in addition to 212 by the executive officer, the deputy executive officer and the financial agent of the Board.

Careful attention is paid to all complaints as to commitment, discharge or treatment of patients, whether originating with the latter or otherwise. Twenty-eight special investigations were made this year in regard to these and kindred matters relating to patients in institutions.

No licenses for the care and treatment of the insane were granted or terminated during the year.

In compliance with section 7, chapter 87 of the Revised Laws,

PLANS AND SPECIFICATIONS

have been examined and approved by the Board as follows:—

Westborough Hospital. — July 10, 1907: Service building, and new water supply for fire protection, provided for in chapter 555, Acts of 1907.

Medfield Asylum. — Nov. 14, 1906: Superintendent's house, and alterations and improvements to convert the old power house into a bakery and storeroom, provided for in chapter 439, Acts of 1906.

State Colony. — Oct. 24, 1906: Barn, substantially like that approved March 14, 1906, provided for in chapter 444, Acts of 1905.

Hospital for Epileptics. — Aug. 14, 1907: Stable for horses, provided for in chapter 91, Resolves of 1907.

Foxborough Hospital. — May 8, 1907: Laundry building, provided for in chapter 500, Acts of 1906.

Aug. 14, 1907: Coal trestle, provided for in chapter 90, Resolves of 1907.

Massachusetts School for the Feeble-minded. — Nov. 14, 1906: Two nurses' homes, provided for in chapter 500, Acts of 1906.

Wrentham State School. — Aug. 14, 1907: One-story wooden buildings for 50 boys, provided for in chapter 555, Acts of 1907.

Financial Statement of the Board for the Fiscal Year ending Nov. 30, 1907.

ITEMIZED STATEMENT OF EXPENDITURES.

Travelling and office expenses:—

Travelling expenses:—

Members of the Board,	.	.	\$306 23
Owen Copp,	.	.	\$205 05
Lowell F. Wentworth,	.	.	279 22
John E. Fish,	.	.	69 97
Winfred H. Lane,	.	.	393 15
Francis B. Gardner,	.	.	107 88
Elmer R. Libby,	.	.	241 71
Benjamin F. Ward,	.	.	368 40
Randolph V. King,	.	.	93 53
Fernald Hutchins,	.	.	172 40
Paul A. Green,	.	.	55 51
Mabel G. Gragg,	.	.	287 68
Alice C. Berce,	.	.	197 40
		—————	2,471 90
		—————	\$2,778 13

Office expenses:—

Express,	.	.	\$31 21
Postage,	.	.	334 50
Printing and binding,	.	.	466 96
Printing and binding annual report,	1,244	05	
Publications,	.	.	177 98
Stationery and office supplies,	.	.	755 13
Telephone and telegrams,	.	.	154 84
Extra service,	.	.	5 00
Miscellaneous,	.	.	51 27
		—————	3,220 94
		—————	\$5,999 07

Salaries of officers and employees:—

General office:—

Owen Copp, M.D., secretary and executive officer,	.	.	\$5,000 00
Lowell F. Wentworth, M.D., deputy executive officer,	.	.	3,000 00
Sarah Chapman, first clerk,	.	.	1,000 00
Nellie F. Ball, second clerk,	.	.	800 00
Eda W. Fitch, clerk,	.	.	566 67
Bessie M. Field, stenographer,	.	.	300 00
Fred A. Hewey, transportation officer,	.	.	1,100 00
Ella Heal, transportation officer,	.	.	700 00
		—————	

Amount carried forward, \$5,999 07

<i>Amount brought forward,</i>	\$5,999 07
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Financial department:—

Elmer R. Libby, financial agent,	2,000 00
Rebecca J. Greene, accountant,	758 34
Edith A. Stevens, clerk,	700 00

Support department:—

Francis B. Gardner, support agent,	1,916 67
Benjamin F. Ward, visitor,	1,400 00
Fernald Hutchins, visitor,	500 00
Randolph V. King, visitor,	345 71
Paul A. Green, clerk,	733 33
Maude F. Freethy, stenographer,	700 00

Family care:—

John E. Fish, M.D., medical director (3 months),	476 19
Winfred H. Lane, M.D., medical director (9+ months),	1,589 29
Mabel G. Gragg, visitor,	800 00
Alice C. Berce, visitor,	645 56
Clara L. Fitch, stenographer,	700 00
	<hr/> 25,731 76

Transportation and medical examination:—

Travelling expenses of officers:—

Fred A. Hewey,	\$1,081 22
Ella Heal,	565 37
Mabel G. Gragg,	298 77
Alice C. Berce,	259 90
	<hr/> \$2,205 26

Travelling expenses, patients,	7,633 05
Assistance,	1,288 87
Express,	41 96
Telephone and telegrams,	12 97
Miscellaneous,	18 16
	<hr/> \$11,200 27

Refund to this appropriation,	3 65
	<hr/> 11,196 62

Support of insane boarded out in families:—

Board,	\$35,534 51
Clothing,	160 15
Medical attendance and medicine,	252 39
Special nursing,	10 00
	<hr/>

<i>Amount carried forward,</i>	\$42,927 45
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<i>Amount brought forward,</i>	\$42,927 45
Burial expenses,	20 00	
Express,	2 78	
Telephone and telegrams,	60	
Miscellaneous,	.	.	.	.	12 00	<hr/>
						35,992 43

Other expenditures under control of the Board:—

Support of insane persons in the Boston Insane Hospital,	80,824 25
Support of State paupers in the Hospital Cottages for Children,	2,880 83
Reimbursement of small towns,	880 43
	<hr/>
Total expenditures,	\$163,505 39

FINANCIAL DEPARTMENT.

The organic law establishing the Board contained this requirement: "The Board shall prescribe a uniform system of keeping accounts in the several state institutions under its supervision, and the same shall be adopted and used in said institutions." (Section 18, chapter 433, Acts of 1898.)

The study of the subject convinced the Board of the urgent necessity of establishing such uniformity of accounts.

The first step was determined by the legislation of 1901 (chapter 303, Acts of 1901), which provided that "an annual appropriation shall be made for the support of each of the state insane hospitals and insane asylums, the Massachusetts hospital for dipsomaniacs and inebriates, the Massachusetts hospital for epileptics, the Massachusetts state sanatorium, and the Massachusetts school for the feeble-minded, . . ." and that "the salaries and wages of all officers and employees and all bills for supplies and other expenses of said institutions shall be paid from the treasury of the Commonwealth, upon detailed schedules sworn to by the superintendent and approved by the trustees. Full copies of the pay rolls and bills shall be kept at each institution, but the originals shall be deposited with the auditor as vouchers," and that "all moneys received from cities and towns or from individuals for the support of inmates in said hospitals, asylums or other institutions, and moneys received for articles sold therein, shall be paid into the treasury of the Commonwealth . . ."

Theretofore each of these institutions had its own treasurer, who received and disbursed all income under the direction of the trustees, without supervision of the State Auditor and Treasurer, except bills payable for the support of State charges at fixed rates. This legislation brought these institutions under the supervision of these State officials. The form of their accounts also was brought under the direction of the State Auditor, according to section 16, chapter 6, Revised Laws, namely: "The accounts of all state, penal and charitable institutions, and all other public institutions, for the support of which appropriations are annually made, shall be kept at such institutions under the direction of the auditor, and shall be as nearly uniform as the nature of the institutions will permit."

He immediately prescribed a uniform classification of expenses under certain general expense divisions and sub-divisions. This was a distinct advance, but too general in character to meet the full needs of the superintendents and the State Board. Moreover, it did not provide for uniform inventories, nor auditing accounts independently of the auditor employed by the institution.

Chapter 184 of the Acts of the Legislature of 1906 imposed upon the Board the duty of reviewing the annual estimates for maintenance expenses of the State institutions under its supervision, and required the expression of its opinion as to the necessity or expediency of granting appropriations in accordance with them. Accurate information in detail as to their accounts and business methods was needed to facilitate the intelligent discharge of this duty.

An expert accountant was appointed financial agent of the Board for this purpose. He has visited the institutions for the inspection of their bills and accounts and observation of their methods of purchasing and handling supplies. It was the intention that he should thus become familiar with the needs of the institutions and co-ordinate them with those of the State Board, and eventually formulate a set of accounts in harmony with the special requirements of both and the general requirements of the State Auditor, and introduce them gradually under the specific authority above cited. A beginning in this direction had already been made when the legislation of 1907

(chapter 139) extended the duties of the State Auditor so that it provided that "he shall at least once in each year and oftener in his discretion, audit the accounts of all state officials, boards and institutions receiving moneys to be turned into the treasury of the Commonwealth, which accounts shall be kept in such form and manner as he shall prescribe," and repealed the specific authority of the Board to prescribe such accounts. The Board was thus relieved of any further responsibility in the matter, and concentrated its attention upon other important functions of this department.

The Board has found that uniformity of methods and results in the different institutions follows knowledge and comparison of their activities; that efficiency and elevation of standards supervene when the best method or result in any institution becomes known to all, and that no other spur is necessary than the consciousness of superior excellence of some other institution.

Hence the Board has sought through its financial agent, by analysis of bills and other investigation, to ascertain the prices paid for supplies, quantities and qualities used, methods of purchasing and handling, conditions of contract, discounts for early payment, etc. This information has been arranged in comparative form and distributed monthly to every institution for its use. It has aimed not to dictate in anything, but to be helpful in discovering and communicating the results of each institution to all of them. During the year it has distributed monthly the total cost, total quantities, average price and maximum and minimum prices of butter, butterine, crackers, bolted meal, graham, rye and other cereals, eggs, flour, fish, fruit, beef, veal, lamb, mutton, pork, poultry, molasses, syrup, sugar, tea and coffee, vegetables, lard, yeast, etc.

Notes have been made when indicated to explain differences and to facilitate a fair comparison. But, at the best, figures can tell only a partial story. They show variations which may be justified by difference of conditions or due to faulty methods. The explanation is sought by special inquiry by one institution of another. Such inquiry not only contributes to more definite knowledge, but stimulates to more earnest effort.

The results are gratifying. Stewards are comparing notes;

prices are coming to essential uniformity; discounts for early payments have become general; and local efficiency is increasing without encroaching upon individuality.

The experience of the year shows that monthly price averages are impracticable and inadequate. The labor of computing them is enormous. The period is too short to furnish useful comparison. In the future it is intended to issue monthly quotations of prices for individual purchases, with total cost, qualities and quantities, and to compute averages for the year and a series of years for issue in special bulletins.

SUPPORT DEPARTMENT.

The primary aim of this department is the determination of claims for support of patients admitted to State institutions who become State charges.

An agent visits the institution, interviews each patient, and procures all the information possible as to the financial ability of the persons liable for support and as to any private resources which may properly become available for this purpose. Confirmation and additional facts are obtained by communication with relatives and friends and other investigations.

During the year, 83 such visits were made to institutions and 1,340 visits to relatives and friends. Histories of 2,291 patients were taken and recorded. .

The first consideration is, whether the patient has a legal or moral claim for support upon the Commonwealth. If not, investigation is made as to the place where such patient belongs.

If he has no claim elsewhere, he is accepted as a State charge. If he has such claim elsewhere, when his condition allows, he is returned in charge of a caretaker at the expense of the Commonwealth.

During the hospital year, such investigation has led to the deportation of 60 aliens by the United States Immigration Commissioner and 115 by agents of the Board,—a total of 175, compared with 172 the previous year.

The second consideration relates to patients who properly belong in the Commonwealth, or are accepted as State charges.

Are there any private funds properly available for the whole or partial support of such? The department seeks to ascertain all the facts as to such property and to allow all just claims upon it. Care is taken not to cause hardship to any one and to recognize all just claims.

During the year 94 State charges have been made private patients at \$5 and upwards per week; 225 have become reimbursing patients, usually at \$3.25 a week. The average weekly rate paid by reimbursing patients was \$3.01.

Such payments for reimbursing patients amounted during the year to \$79,495.76, and since Jan. 1, 1904, to \$271,933.46. This sum does not include payments for State charges who become private patients. The trustees of institutions fix private board rates, usually at not less than \$5 a week. The average private rate last year was \$5.26.

The number of reimbursing patients Oct. 1, 1907, was 536, compared with 541 the previous year; the average number during the year, 482.33, compared with 458.76 the previous year,—an increase of 23.57. Reimbursing patients constituted 5.05 per cent. of the inmates of public institutions.

The average weekly rate of reimbursement was \$3.01, compared with \$2.95 the previous year.

These and other related details are set forth more fully in the following tabulations:—

Reimbursements, 1906-07.

INSTITUTIONS.	DAILY AVERAGE NUMBER.		NUMBER REMAINING Oct. 1, 1907.			UNITED STATES DEPORTATION CASES.		
	Male.	Female.	\$3.25 a Week.	Less.	Male.	Female.	Daily Average Number.	Average Weekly Per Capita.
Worcester Hospital,	44.90	39.57	\$3.03	66	19	40	45	\$5.00
Taunton Hospital,	31.98	31.53	3.09	55	10	30	35	5.00
Northampton Hospital,	28.45	34.12	3.05	55	12	32	35	5.00
Danvers Hospital,	48.19	57.07	3.08	100	25	54	71	4.12
Westborough Hospital,	19.64	39.53	3.17	73	5	24	54	1.98
Boston Insane Hospital,	9.57	7.83	2.66	11	7	8	10	.35
Insane wards, State Hospital,	.89	2.20	2.63	4	-	-	4	.30
Worcester Asylum,	11.75	14.29	3.16	26	2	11	17	-
Medfield Asylum,	12.13	28.90	2.65	37	8	14	31	-
State Colony,	2.85	1.84	2.53	3	2	3	2	-
Hospital for Epileptics,	5.87	1.84	2.91	5	3	7	1	-
Asylum for Insane Criminals,	1.00	-	2.80	-	-	-	.08	3.50
Foxborough Hospital,	.11	-	3.25	-	1	1	-	-
Hospital Cottages,	-	-	-	-	-	-	-	-
Family care,	.19	6.00	2.33	2	5	-	7	-
Totals,	217.61	264.72	\$3.01	437	90	224	312	13.94

Receipts for Support of Reimbursing Patients.

LOCATION OF PATIENTS.	Oct. 1, 1905, to Nov. 30, 1906 (14 Months).	Year ending Nov. 30, 1907.	Total Jan. 1, 1904, to Nov. 30, 1907.
Worcester Hospital,	\$13,778 36	\$13,903 82	\$45,481 28
Taunton Hospital,	12,456 39	11,112 03	37,027 74
Northampton Hospital,	10,205 87	10,287 26	33,877 28
Danvers Hospital,	19,400 87	17,925 87	61,905 55
Westborough Hospital,	12,152 84	10,274 50	35,371 06
Boston Insane Hospital,	2,421 07	2,497 69	6,572 59
Worcester Asylum,	5,471 51	4,284 40	16,450 19
Medfield Asylum,	8,671 59	5,655 68	25,389 73
State Colony,	1,163 80	617 67	2,032 25
Insane Wards, State Hospital,	161 90	477 38	932 62
Asylum for Insane Criminals,		523 23	604 03
Hospital for Epileptics,	1,225 83	1,168 05	3,788 19
Foxborough State Hospital,	73 89	19 04	92 93
Hospital Cottages,	62 14		86 14
Family care,	424 64	749 14	1,472 22
Almshouses,	133 96		849 66
Totals,	\$87,804 66	\$79,495 76	\$271,933 46

DEPORTATION.

There were considered for deportation 362 cases, compared with 325 the previous year. The Board deported 55 to other States, 60 to other countries,—in all, 115. In addition, the United States Immigration Commissioner deported 60. Altogether, 175 were deported, compared with 172 the previous year.

Since Oct. 1, 1898, 1,060 persons have been deported by the Board, of whom 24 returned once and 10 twice. Of those returning, 9 are now in institutions in this State.

Details of the disposition of cases under consideration for deportation are shown in the following table:—

STATE BOARD OF INSANITY.

[Jan.]

	STATE BOARD.		UNITED STATES IMMIGRATION COMMISSIONER.		TOTALS.		TOTALS.		1906.		1907.		INCREASE.	
	Men.	Women.	Men.	Women.	Men.	Women.	Men.	Women.	Men.	Women.	Men.	Women.	Men.	Women.
Cases pending Oct. 1, 1906,	.	.	26	28	54	4	9	31	32	63	76	63	131	
Since referred by support department,	.	.	142	64	206	49	33	191	97	288	240	288	48	
Rejected by Immigration Commissioner,	.	.	6	2	-	2	1	6	2	8	9	8	1	
Became United States cases,	.	.	-	-	-	-	3	2	1	3	-	3	3	
Total cases under investigation,	.	.	174	94	268	56	38	94	230	322	362	362	37	
Deported,	.	.	81	34	115	36	24	60	117	68	172	175	3	
Viz.: Other States,	.	.	32	23	65	-	-	-	32	23	56	55	5	
Other countries,	.	.	49	11	60	36	24	60	85	35	120	120	21	
Discharged,	.	.	24	10	34	2	1	3	26	11	37	37	12	
Viz.: Care of friends,	.	.	22	10	32	1	1	2	23	11	34	34	9	
Escaped,	.	.	2	-	2	1	1	1	3	-	3	-	3	
Died,	.	.	-	-	4	2	6	1	-	4	2	6	6	
Withdrawn,	.	.	-	-	5	1	6	8	4	12	13	5	18	
Viz.: Private patients,	.	.	3	-	1	3	1	-	1	4	1	4	4	
United States cases,	.	.	2	-	-	-	-	-	2	1	3	3	3	
Rejected by Immigration Commissioner,	.	.	-	-	-	-	-	-	11	7	4	11	9	
Returned to penal institutions,	.	.	-	-	-	-	-	-	-	-	1	1	1	
Dropped from further consideration,	.	.	21	29	50	-	-	-	21	29	50	40	10	
Viz.: Impracticable to deport,	.	.	16	19	34	-	-	-	15	19	34	27	7	
No place to go,	.	.	6	10	16	-	-	-	6	10	16	13	3	
Total cases closed,	.	.	135	76	211	46	29	75	181	105	286	262	24	
Cases pending Oct. 1, 1907,	.	.	39	18	57	10	9	19	49	27	76	63	13	
Viz.: On visit,	.	.	-	-	-	-	-	-	-	-	1	-	1	
Under sentence,	.	.	10	-	10	1	-	-	1	11	-	3	8	
Not in condition to deport,	.	.	9	9	18	-	-	-	9	9	18	31	18	
Awaiting action,	.	.	20	9	29	9	9	18	29	18	47	28	19	

1 Decrease.

TRANSFERRED FROM —

TRANSFERRED TO —

	Total	Worcester Hospital	Taunton Hospital	Northampton Hospital	Danvers Hospital	Westborough Hospital	Boston Insane Hospital	Insane Wards, State Hospital	State Hospital	Worcester Asylum	Medfield Asylum	State Colony	Hospital for Epileptics	Asylum for Insane Criminals	Foxborough State Hospital	School for the Feeble-minded	Wrentham State School	Hospital Cottages for Children	Total, Aggregates.
Family care,	9	17	7	10	21	-	3	-	1	-	-	-	-	-	-	-	-	-	68
Total public,	74	180	111	143	112	26	10	5	4	26	1	2	1	12	-	1	718	54	785
McLean Hospital,	-	-	1	-	-	1	-	1	-	-	-	-	-	-	-	2	-	2	6
Other private hospitals,	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	1	3
Total private,	-	-	1	-	-	1	2	-	-	-	-	-	-	-	-	4	-	4	5
Aggregates,	74	181	111	143	113	28	10	5	4	26	1	2	11	12	-	1	722	54	794

TRANSFERS.

Seven hundred and ninety-four patients have been transferred during the year: 650 between public institutions; 122 between public institutions and families; 17 between public and private institutions; 5 between private institutions, according to the preceding tabulation.

THE ALLEGED INSANE, FEEBLE-MINDED AND EPILEPTIC IN ALMSHOUSES AND IN THE COMMUNITY.

The tentative arrangement has been continued with the State Board of Charity relative to the visitation of alleged insane, feeble-minded or epileptic persons who may be cared for in almshouses or private families under public support. Nine such cases were reported by the Board of Charity, and investigated by a medical officer of the Board of Insanity; 4 were committed to insane hospitals; 1 to the Hospital for Epileptics; 1 to School for the Feeble-minded. Commitment was recommended in one case, but no action has yet been taken. No action was deemed necessary in the other cases.

In addition, 6 special investigations were made with regard to the care of such persons in almshouses and private families. One was committed to an insane hospital; 3 were suitably provided for by overseers of the poor. No action was deemed necessary in the other cases.

Twelve visits to almshouses and private families for special investigation were made by a medical officer of the Board.

Respectfully submitted,

GEORGE F. JELLY,
MICHAEL J. O'MEARA,
HENRY P. FIELD,
WILLIAM F. WHITTEMORE,
HERBERT B. HOWARD,
State Board of Insanity.

APPENDIX.

SEMIANNUAL CONFERENCES.

The sixteenth semiannual conference of the Board and the trustees of the different institutions was held at the State House on Nov. 10, 1906.

The subject for discussion was: Discharge of the insane and defective from institutions.

- (1) What classes of patients are suitable for discharge?
- (2) Should any such patients be allowed to remain in institutions for a home, work, etc.? If so, why?
- (3) Should systematic effort be made to provide for and assist such unrecovred patients to live in the community?
- (4) Is there need of an "after-care" system to supplement family care?
- (5) How long should an inebriate, temporarily insane and committed as such, be detained? May he properly be detained under commitment as insane for treatment of the inebriate habit longer than necessary for the treatment of insanity?
- (6) What general instructions do you give patients and their friends at the time of discharge?
- (7) Would it be possible and wise to formulate and print such general instructions for distribution at each institution?
- (8) Other aspects of the subject.

The views of the different speakers as expressed at this conference were as follows:—

Dr. George S. Adams, superintendent of Westborough Insane Hospital:— Question 1: The classes of patients discharged fall readily into four groups.

The first group consists of the recovered cases. Most of these have relatives or friends to whom they can go, and sometimes I discharge them to their employer or permit them to go out and seek employment themselves, and discharge them when they have obtained a satisfactory situation. One or two such cases I have asked the State Board of Insanity to find a place for, and have them under their supervision, but usually there is no difficulty in finding some one to whom we can discharge a recovered case.

The next group contains those who appear to be capable of self-support although not recovered, and are discharged to their friends and are supposed to be under some supervision, although I find that relatives generally permit them to do about as they please. A portion of these cases go on to complete recovery, and some of them are returned to the hospital again.

The third group of cases are those who are not well and who probably never will be well, but who are not dangerous either to themselves or others, and do not require hospital treatment, and can be cared for by their friends at home. Many such cases are willingly taken out by their relatives. The friends of others require some urging before they will undertake to give a patient a trial outside.

The fourth group consists of those who, after a sufficient residence in the hospital to determine their disposition and tendencies, can be cared for by the patient boarding out under the supervision of the State Board of Insanity. I place in this group all those whom I believe would be benefited by being away from hospital life, and also those who, while not being any better off, would be happier away from the hospital. These are the considerations that lead me to recommend cases to the State Board of Insanity, and I do not permit the fact of their being helpful patients influence recommendations.

Question 2: I think there will always be patients who are helpful but who, because of their delusions, habits and propensities, are unsafe persons to trust to family care, and on this account should remain in the institution, and they comprise the larger number of patients who are occupied. Such women patients assist in the ward work, kitchen, laundry and sewing room; and the men, in addition to their ward work, help on the farm and general out-of-door work. Some of these cases are always improving, and a person whom to-day we consider to be unsafe outside of an institution, in a year from now may be considered for boarding out or for discharging to home care. It is certainly a duty owed to the State, which provides care and treatment for the insane, that as many self-supporting cases as possible should be returned to the community, and the best means to this end is, I believe, through the boarding-out system under the supervision of the State Board of Insanity.

Patients whom I would not consider capable of caring for themselves improve to such an extent after being boarded out that they may be discharged as capable of self-support. Boarding out makes

an adjustment to the ordinary family life in the community that cannot be done in the hospital.

Question 4: I think that the opportunities afforded under the present laws of Massachusetts for supervision by the State Board of Insanity of boarded out and other cases seem to me ample for the needs of all the cases that can leave the hospital.

Question 5: It is our custom, when an inebriate committed as insane clears up in a few days, to keep him at the hospital three months, believing that by so doing the best good of the patient as well as the State is conserved. Should the insanity persist for one or two months, as is sometimes the case, I keep the patient under observation until free from insanity for at least six weeks.

Question 6: My instructions to patients and their friends are more apt to be special than general, being applied to the needs of each patient,—but in general the friends are advised to see that the patient is occupied, but not given too long hours of labor and not too much responsibility, and that attention is to be given to their securing a proper amount of sleep. In cases with a history of drinking we emphasize the necessity for abstinence and the avoidance of companionship that will lead to their drinking.

Question 7: I believe that it would be impossible to formulate and print such general directions, but there will always remain the need of special emphasis being laid upon special condition in nearly every case.

Dr. Henry R. Stedman, trustee of Taunton Insane Hospital:—As regards the classes of patients in our hospitals who ought to be discharged, it goes without saying that all who make a good recovery ought to be set at liberty unconditionally, that is, if they have given sufficient indication of their ability to withstand outside life. Where there is a question of this we have the “trial visit” law, which allows us to test them. Chronic, unrecovered patients may be and frequently are discharged, provided their insanity is of a mild nature, that they are not dangerous to themselves or others, do not neglect themselves and are to have proper oversight and surroundings. There is still another class that ought properly to be discharged. I refer to the acute, presumably curable case which has reached the stage where it does not progress, and it is uncertain whether it will go on to confirmed dementia or will convalesce. Here I think a trial visit home is highly advisable. It often marks the turning point to recovery. Excellent authorities have advocated, as the result of long experience, much earlier discharges from institutions for the insane than now prevail. There

are, I think, occasionally patients who ought to be allowed to make the hospital their home, cases which are well while in the institution but who immediately relapse when allowed their freedom. They cannot remain at home and are not suitable for boarding out. It is legitimate to have such patients remain permanently, provided the proceeds of any remunerative work that they may do go toward their support there. Every effort should be made to fit the unrecovered patient to live in the community, but only through a boarding-out system such as our own, which has done and is doing such efficient work in making patients self-supporting who might otherwise be left as charges upon the State.

For the recovered patient the after-care system is a departure which is, I believe, destined to be a valuable aid toward the prevention of insanity by preventing or delaying relapses. The object of an after-care association is to provide for the temporary supervision, assistance and friendly aid and counsel, through charitable associations, of patients who are discharged, recovered or convalescent, from the hospitals for the insane. Later, when such assistance is in full operation, it may be possible to look after the unrecovered patients. These associations employ paid agents, who go to the homes of recovered or convalescent patients when they are discharged, ascertain what their surroundings are, provide employment, perhaps give them money or clothing,—more than is allowed them on discharge,—find out what adverse influences operate against them, and start them under better auspices and hygienic conditions, thus doing something practical to prevent their breaking down as before. It has been well said that society does not fulfill its duty to the insane when it has helped to support and treat them in the hospitals if, on their discharge, it leaves them without support and without resources, and exposes them to the causes which lead to relapse. Such an omission is a mistake, not only from a humanitarian but from an economic point of view. The great point is that this is the only tangible means available for the relief and prevention of insanity. Before the patient has had an attack of insanity advice and caution are thrown away on him, for no attention is paid to them; but when once he has had an attack he will dread its repetition. You then can appeal to him; you then know also just what the adverse surroundings and influences have been which tended to bring on the original attack, and you have something definite to cope with.

This subject was brought before the Conference of Charities and Correction about eight years ago. Then the matter languished and

no further interest was taken in it. It was perhaps thought a little visionary. But recently it has been taken up in New York, and the first after-care system inaugurated there. After-care committees have been appointed in connection with three different State hospitals, consisting of local members of the State Charities Aid Association and the superintendent and members of the hospital boards of managers. There are already some results which are really promising, and probably within a year there will be a report on that subject. There are few better opportunities at hand for benefiting the mass of the insane and the State than are afforded by after-care work for these unfortunates. Is it not a satire on our public work for the insane in this respect that convicts have been assisted and otherwise looked out for after leaving prison by associations for the aid of discharged prisoners, which have been in existence for many years?

Dr. Chas. W. Page, superintendent of Danvers Insane Hospital: — The patients at Danvers, of course, are discharged as everywhere else. We discharge those cured, but we also discharge eight or ten times as many who are not recovered. The discharge of these latter named patients does not generally rest wholly with the superintendent; it depends upon the patient's family, social influences and circumstances of that sort. An ideal system would be far from what we actually carry out in practice. We discharge quite a good many who seem to us as hardly proper subjects for discharge, but only after a good deal of importunity on the part of friends and a great many promises that the patient will be properly looked after and cared for. Frequently we refer such patients and their friends to the State Board of Insanity, asking them to get from the Board an opinion as to the desirability of discharge.

If the patients are private cases we sometimes keep them on commercial principles. If the friends can support them more cheaply with us than elsewhere, they remain, but they have liberty to remove such at any time. No visiting day goes by without one to five most urgent appeals to have certain patients removed. The friends come to the hospital and find that the patients want to go away. They make it very uncomfortable sometimes for those officers who wish to do their duty toward the patients, when further hospital treatment seems necessary.

I think there are certain cases that ought not to be retained in the hospital indefinitely, even if not cured. Patients may acquire the institution habit; some lose their ambition and drift off into a chronic condition after a prolonged hospital residence, which

result should be feared and a remedy provided, if possible. I have no doubt that a great many cases that have passed the acute stage would be better off if discharged early than if retained. There, if you act upon the ideal theory, you take great responsibility. You don't know what helps they have to live outside, you don't know what temptations they will meet. The superintendent is criticized if such relapse, whereas the same cases possibly with proper care would get on all right outside of an institution. If the after-care system would fill the requirements of such cases it is something very much to be desired. In that direction, I do feel that there is a field for after-care treatment, but suitable cases would not be very numerous. I have kept some patients in the hospital when they had sufficiently recovered to go out under favorable conditions, but if forced to go out they would have to go to friends who were known to be injudicious, where the surroundings would be unfavorable, or would go to the almshouse. I have also kept some patients who in all probability would live the even tenor of their lives in the hospital, but if put into the community under adverse conditions would get morbid, and probably bad enough to be compelled to come back to us. There, again, the after-care system would be helpful if a committee were organized with money back of it to carry on work of this sort. I think there might be such work of a good deal of magnitude. I think perhaps it should be inaugurated by the State; perhaps it might be carried on in connection with the boarding-out system. I think that would be a better method than to have a great many boards with very little to occupy the members. Experience is worth a great deal, and a single hospital would not have material enough to employ such a committee.

In regard to inebriates we have rather elastic rules. Where a case clears up rapidly and promptly we endeavor to keep such patients on our books two or three months. Frequently, circumstances are such that we yield to the wishes of the patients and their friends and let them go sooner, but generally we keep them three months, very seldom more than that time, unless hallucinations are evident. And then there are cases where possibly prolonged hospital treatment might inspire them to resist temptation to drink. I have in mind some cases who were committed to the hospital as habitual drunkards, who, after many years of hospital confinement, have gone out and lived for years without using intoxicating liquors, but the majority of such cases, while going out with the best resolutions, fail, of course, to resist temptations.

We cannot formulate any special directions for such patients

upon leaving the hospital. We generally give friends more advice than we do the patients, and frequently more than they seem to appreciate.

Mr. Samuel W. Hopkinson, trustee of Danvers Insane Hospital:— There are one or two matters I would speak a word about. In regard to the second question, I don't think it is a good plan for patients to stay in the hospital for work if they are in suitable condition to be discharged, but there are cases which I think live all their lives in the institution though they may not be very insane. I have in mind a feeble old lady who came to me one day and said, "Mr. Hopkinson, do you suppose I can remain here as long as I live?" I said, "I suppose that you can;" and she died there. It would have been cruelty to put her out. She was a public charge. Those cases should be allowed to remain, but if they are cured and well I don't see why they should not be discharged. The after-care of those patients is to be considered. I am now considering the case of an habitual drunkard. He wants to go home; his family cannot have him at home, for when he is there there is trouble. The question for a discharge is, do we believe he will ever go back to his habits of intemperance? Some care should be exercised over him. Let him be discharged, and have it understood that the police are looking after his interest and that they can bring him back within six months. It is important that a patient should know that he is to have some care, and that he should know what that care is, as a restraint; otherwise he may soon return.

Dr. Arthur V. Goss, assistant physician, Taunton Insane Hospital:— Old Professor Darling used to say, "There are some things that we know, some things that we ought to know, and some things that we must know," and I should say that the discharge of patients from hospitals might be brought under three heads,— a certain number that we may discharge, a certain number that we ought to discharge and a certain number that we must discharge.

I don't think there is any difference of opinion in regard to the discharge of patients who are suitable to go into the community, but there are exceptional cases where the circumstances are such that the institution is their only proper home.

The third topic really concerns the system of family care, upon which we are all agreed.

In regard to after-care I have nothing to add to the remarks made by Dr. Stedman.

In regard to the fifth topic, I should say that the inebriates

who are committed as such and are suffering from insane symptoms are cases either of chronic alcoholic insanity or cases of acute alcoholic insanity, or delirium tremens. In regard to the chronic cases, I should say that they should be treated as any other cases of chronic insanity until they can be properly discharged. In the case of acute alcoholics, those suffering from delirium tremens, I have a great many doubts in my own mind whether they should be committed to the hospital in the first place. After the symptoms of acute alcoholic insanity have disappeared, and the patient is just as sane as at any time in his life, I fail to see why the hospital should detain him. It has been our custom at Taunton to discharge such a patient.

We give no instructions to patients; we give a circular stating that they are permitted to return before a certain time. What instructions we give are individual, and are varied according to the case under consideration.

Dr. Copp:—Do you think of any instructions in regard to relapse or keeping patients up that might be given?

Dr. Goss:—I have no opinions to present at present. I think that certain general directions could be given that would be applicable to a great majority.

Dr. Copp:—You are constantly giving advice in regard to different cases; are you always able to reach the friends?

Dr. Goss:—In a great majority of cases I have had opportunity to converse with the responsible parties who are to look after the patients; of course not in all cases.

Dr. Ernest V. Scribner, superintendent of Worcester Insane Asylum:—The institution with which I am connected has to do only with chronic cases. The question of discharge is not whether the patient has recovered,—although in the course of years we have had some recoveries.

I agree in the main with the speakers who have preceded me. I believe that many patients should be discharged long before the time of actual recovery. In many instances patients who have ceased to improve under hospital care are found after discharge to improve materially in their own homes or boarding out.

With reference to the second question, I do believe that in certain instances patients should be allowed to remain in institutions. I have had under my observation several cases in my hospital experience who seem to remain well only so long as they remain in institutions. I remember one case in particular, a patient who had been about well for two years. The friends desired to take

him home and I advised them to allow him to remain. He was taken home, and in a week was brought back in a highly excited condition.

I thoroughly believe that some systematic effort should be made to assist patients who have been in institutions to return to the community. I think that assistance should take an unobtrusive form, and I fail to see why the State Board of Insanity should not undertake something of this sort without additional legislation.

In regard to the fifth question I do not feel qualified to speak. My custom has been entirely in the line of the suggestions of the gentlemen who have spoken before.

I should not say that general instructions could be formulated and printed that would apply to each case. I believe that such instructions should be individual, that patients and friends should be given instructions applying to the particular case.

Dr. John A. Houston, superintendent of Northampton State Hospital:—Our custom at Northampton in relation to the discharge of patients agrees very closely with those already described at the other hospitals in the State. In considering the discharge of a patient I always think that we must first consider the patient,—whether he is well enough to be discharged or whether he would be as well off outside a hospital as in; secondly, we must consider the friends and family of the patient; and thirdly, the community,—the place where the patient will go, what the surroundings will be, who the neighbors are, and whether they will be disturbed by such a patient going home. Not all patients who are unrecovered should be kept in the hospital. A good many patients are well enough to get along outside in the community who, though still having delusions, are competent to care for themselves, but I believe that no patient who would be a nuisance or source of disturbance or alarm to the neighbors should be allowed to go home. So I consider, first, whether he is well enough: if he is not fully well, I take into consideration whether he would be as well cared for outside the hospital as in, and thirdly, whether he would be dangerous to himself,—whether he is suicidal,—and whether he would be an annoyance to the neighbors. I do not discharge an unrecovered patient if there is prospect of recovery should he stay in the hospital. All others I allow friends to take, if they promise to look after them properly and to safeguard the community.

My general reply to the second question would be about as others have spoken. I think it is justifiable to keep patients in the hospital for the work they do in certain cases, and those cases

would be patients who are not able to look after themselves but who would be comfortable enough to be at home if there was some one to look after them; but if they have no such people, I believe that a good many cases are better off in the hospital than they would be boarding out; in other words, I think the hospital should have the benefit of the work rather than the private families where they would be placed at board. This, of course, involves the question whether the patient would be benefited by boarding out. I would not keep patients in the hospital if they would be better off if boarded out, but we have a good many patients who like the hospital life and who would not seek another home. We very often have patients refuse to go to boarding-out places. But I believe in the boarding-out system thoroughly, and we pick out patients whom we believe suitable for boarding out.

I think there is great need of an after-care system, but I see great difficulties in carrying it out. In large cities it might be easier than in country districts, such as our section of the country.

In regard to the fifth question, I should say that inebriates temporarily insane should not be kept long in the hospital as a rule. If a man comes in suffering from delirium tremens, and recovers from acute insanity, it is our custom to keep him only four, five or six weeks, provided he has not had frequent attacks prior to the one which brought him into the hospital, and provided he can procure work outside. It is dangerous to discharge such a man unless he has a place to go to. Oftentimes employers will promise work to such patients as soon as they go home. The temporarily insane we like to keep three months. We have one now,—temporarily insane from the opium habit. I think we are justified in keeping such patients until we think they are in proper physical health, and ready to withstand the temptation to return to their habits,—three, four or five months.

We give general instructions. Our general instructions are to avoid all causes that would contribute to sending them to the hospital, to avoid much company, to keep at home a good deal; we advise in regard to excesses, etc., and we advise, as a rule, the seeking of employment immediately.

Dr. Owen Copp, executive officer, State Board of Insanity:—This subject is very important and difficult. Certain guiding principles are laid down in the statutes of the Commonwealth. The trustees, a judge of the supreme court or a judge of probate may discharge inmates of an insane hospital if they are not insane, or, if insane, will be sufficiently provided for by themselves or their

friends, or their confinement therein is not longer necessary for the safety of the public or their own welfare.

The State Board of Insanity is required by law to discharge any person restrained of his liberty by reason of alleged insanity if in its opinion such person is not insane, or can be cared for after such discharge without danger to others and with benefit to himself. It would seem to be the intent of the law that no one should be detained as an insane person without definite and sufficient reason.

It is important that the matter of discharge should come up for systematic review at reasonable periods. The Scotch lunacy laws provide that the authority of detention conveyed in an order of commitment shall terminate unless the superintendent or other proper authority file with the general board each year a certificate that such further detention is necessary. This necessitates definite action in every case at least once a year.

There is a direct bearing on the accumulation of insane in institutions. During the last fifteen years we have had more than three hundred insane in institutions at the end of each year than were there at the beginning. Less than one-third of such accumulation was due to increase in the number of admissions; more than two-thirds to the decrease in discharges. There are, of course, good reasons for such retention, but, nevertheless, I think every effort should be made to restore every patient to community life who may properly enjoy it.

If patients have interested friends or means their discharge is assured. If they have neither, they tend to remain after they have passed into a quiet, comfortable or helpful state. Constant attention should be paid to the return of such patients to the community under suitable supervision and with necessary assistance. This is the primary object of family care of the harmless insane as now carried on by the Board. Most employers hesitate to take a person who has been discharged from an insane hospital. It is hard for him to gain a footing or a chance to win confidence. This system helps him to do both. Many others who need to remain under family care are enabled to live a freer and more natural life.

But family care is associated with the idea of insanity. After a time some patients desire to be absolutely free from the supervision of the Board of Insanity, and to break away from all associations which remind them of having been insane. They do not wish to have our visitors come to see them. This need could be met by an after-care association having no official connection with the

system of care of the insane but co-operating with it. It would befriend, advise and temporarily assist such patients who had been discharged from all authority of control.

The sixth question — what general instructions do you give patients and their friends at the time of discharge — suggests the inquiry whether we are taking enough interest in the public. Has the public sufficient knowledge of the peculiar needs of the insane and the difficulties in caring for them? Are we disseminating all the information we might concerning them? Could we not formulate a set of general instructions regarding their care after dismissal from the institution, concerning the preventable causes of insanity, the safeguards against relapse, etc.? In addition to our words of advice as they leave the hospital, could not these printed instructions be given to them and to their friends, and serve a useful purpose?

Dr. James B. Ayer, member of the State Board of Insanity:— At the Massachusetts General Hospital the out-patient department supplements the work of the hospital in its attention to discharged patients.

Dr. Copp:— I think it might be proper for such a patient to remain in the hospital, but he should never be allowed to do so until it has been demonstrated by actual trial that he cannot live in the community. The probability is vastly in favor of the presumption that a patient valuable to the hospital will be able to earn a living outside. He should be tried under such conditions as to give him the best chance of proving that he can or cannot live thus before he is left in the hospital.

About eight hundred patients have been placed in family care. As a rule they were those who would not otherwise have been discharged. More than one out of every five has passed from public support. After an average absence of eleven years only one out of four has reappeared under it.

Mr. Ellerton James, trustee of the new School for the Feeble-minded:— It seems to me that the hospital has no right to hold such an inebriate.

Dr. Copp:— The reference is not to insanity resulting from alcoholic excess. This, of course, should be treated adequately, but there is a class of alcoholic patients who become temporarily deranged mentally and recover within a few days or weeks after commitment. It has been the policy of the Board of Insanity to approve the treatment of such patients in an insane hospital so

long as the symptoms of insanity may require, but to advise their commitment to the Hospital for Inebriates for prolonged treatment of the habit of inebriety after mental symptoms have disappeared.

Just a word regarding the new law relative to discharge from the School for the Feeble-minded. Should it work successfully, it may open the way to a better method of dealing with certain cases which puzzle us,—those of moral insanity or imbecility. Sometimes the physician is convinced of the necessity of permanent detention for such but is doubtful of public and legal support. He is anxious to do his duty by the patient and by the public, but is not always sure of support in the heated controversy when *habeas corpus* proceedings are pending.

An adverse decision puts the hospital officials in the attitude of desiring to unjustly confine a person who ought to have been voluntarily discharged, whereas their true attitude is entirely neutral. Under a strong sense of duty they feel compelled to act according to their conviction, but are glad to be relieved of responsibility if the court be willing to assume it. If the court could review the evidence in such a case at the request of the hospital officials before any issue has arisen there would be greater surety of a decision just to the patient, public and hospital.

Mr. Ellerton James, trustee of the new School for the Feeble-minded:—We would go before the court for instructions just as a lawyer goes to the court for instructions in the matter of a will.

Dr. Copp:—If these cases were considered without any feeling they would be decided according to the opinions of the hospital officials, but in a contest they may not.

Dr. Chas. W. Page:—That would be just shifting the responsibility.

Dr. Copp:—You will not discharge and you want legal support.

Dr. Ayer:—Instructions should concern matters of diet, etc. The friends would be glad to get advice.

Mrs. Morrison:—Does it seem really necessary to send a man who is temporarily insane through inebriety to an insane hospital? It seems to me a sanitarium would be a better place. I think to put him in an insane hospital is likely to make him insane. I don't think it gives a man a chance, and I think to put him in an insane hospital hurts him in his business.

I should think there might be some sort of an association that would care for those who go out, and there are a great many who

have no one to care for them. Very few people will hire them or give them employment. I think if some charitable association were formed it would do a great deal of good.

Dr. Stedman:— Is it not rather a satire on what we are doing for the insane that convicts have long been looked out for after leaving the prisons? Associations for the aid of discharged prisoners have been in existence for years.

Dr. Goss:— I wish to say that I have several times come in contact with this in our little community, where people come to me and ask advice in regard to employing discharged patients, and I have not found people altogether unreasonable in the matter, providing they could be assured that there was no more risk in their employing a person of that sort than any other person they might select. I think there is room for a great deal of systematic, useful work.

Dr. Copp:— If such information could be generally disseminated so that the public would have it without coming to you, would it not be useful?

Dr. Goss:— It certainly would.

Dr. Walter Channing, trustee of the Wrentham State School:— I have been very much interested in this discussion this morning. I think the matter of discharge is one that has not received sufficient attention in a general way, and it has led to a large accumulation of patients in the public institutions. I think it is important in regard to the public feeling toward the institutions. The Board of Insanity is in position to remove some of the prejudice of the public. Patients ought to get into the insane hospitals in the same way as general hospitals, and get out in the same way. We should educate the people better to understand what the conditions are in getting out of institutions. It ought to be easy to get a patient out. The purpose of the hospital is the medical treatment of the patient and to safeguard the public and the patient himself. Discharges should be made from a medical standpoint, at the earliest possible moment. In some quarters — among the Hebrews, for instance — they think if a patient once gets into a hospital they can never get him out.

In regard to the seventh question, I think it would be possible and desirable to distribute general instructions at each institution, — instructions for the benefit of the patient which would be of great value to him, — and I hope that the suggestion in some way will be carried out.

I agree with Dr. Stedman in the matter of prevention. That

is the way in which to put in the very best possible work,—that of preventing a recurrence of the attack.

In the matter of after-care, that has been dwelt on very thoroughly, and I should certainly agree with what has been said, and I am very glad to express my appreciation of the very progressive work which the Board of Insanity has done in educating the public as to what the hospital is doing and what can be done.

Dr. William Noyes, superintendent of Boston Insane Hospital:—As regards question one,—the class of patients who are suitable for discharge,—I think we would all agree upon that. It is the class that is not suitable for discharge that gives me the most concern. I would mention one aspect of the subject, and that is the importunities that we are subjected to for taking out patients whom we consider unfit to go out, and the growing surprise that we find in the ability of friends to get on with the patients whom we do not consider proper to go out; we find that they do make it go. They sign a statement that they do it against advice and assume all responsibility, and I find that certain cases go out and their friends get on with them when in the hospital we were not able to do much for them. The disturbed class,—noisy, troublesome, those who remove their clothing,—we should not allow to go; we should not allow a case to go who is a distinct menace to the community.

I have gained much from the remarks of Dr. Copp in regard to the need of a system of review of the cases which we have under our charge, that is, that we systematically review, and have to face the question after a certain time whether this patient is or is not a proper subject for discharge. I would like to have the question of discharge of certain cases taken out of my hands. There are quiet patients, those whom we grow more or less attached to; they are good workers, and I feel that the psychological moment when those people ought to go out is often passed by. We know their friends, we know the condition of things at home, and we know that the friends are quite willing for them to remain, but I would like to see it put up to us regularly,—have the question raised and some definite reason assigned; and that is the way we could handle it with the friends of patients. They are often indifferent. I think that would do more to reduce the number of insane in the State and throw more people back into the community than any other thing that has been brought up to-day.

Mrs. Sarah D. Fiske, trustee of State Hospital:—I think there are a great many cases who need to stay in the hospital. They are

mostly people lacking self-control, those who dislike minding rules and being told what they should do, and in a private house, among their own friends, it seems almost impossible to exercise the restraint which they receive in the hospital.

Dr. Walter E. Fernald, superintendent of the Massachusetts School for the Feeble-minded:—The Legislature at the last session authorized the trustees of the School for the Feeble-minded to refer a doubtful case to the Probate Court of Middlesex County, upon the approval of such action by the State Board of Insanity, the court to decide whether the patient shall be continued in the school or discharged. The bill was drawn to meet the class of cases where the friends of inmates desire their discharge, and the trustees feel that the case ought not to be discharged,—cases of women of child-bearing age and immoral tendencies. The purpose of this law is to have the specific disposal of each case of this type judicially determined by the court. The law has not yet been tested. We have three cases now before the court.

The seventeenth semiannual conference was held at the State House on April 22, 1907.

The subject under discussion was: What should be the policy of the State Board and trustees of institutions with regard to—

- (1) Hours of work of nurses, attendants and general employees.
- (2) Increase of their wages.
- (3) Provision for married persons and their families.

Dr. Herbert B. Howard, trustee of State Colony for the Insane:—I think that this whole subject of the eight-hour law is something that needs to be approached with seriousness. I wish it had arisen from considering the needs of the patient. I have thought that this thing coming up from the mechanical side of the institution might, if we were not pretty careful, result in something detrimental to the patient. What I mean is this: if there are any of our employees whom we should like to have in the best physical and mental training it is those who are coming in daily contact with the patients. They should not only be the right kind of employees, but they must be properly taken care of, in order that they shall be in condition to do their work. Since this matter of cutting down hours has come up from the other side,—from the mechanical side and the servants' side,—if our appropriations are not sufficient there will be great temptation to carry on our work by saddling some things upon the other employees, or by cutting out some things which ought to be done for the

patients. I am willing to admit that we sometimes use our nurses and attendants longer hours than I should care to work on the average. I think they are the class we ought to consider most in this whole matter,—the class coming in direct contact with the patients. And I hope that the institutions will regulate that matter, if it is to be regulated at all, so that there will be no occasion for laws being passed. Laws in regard to the employees of our institutions are such fixed, rigid things, even if passed with the best of intentions, that they do harass, they do bother where they are not expected to bother, and I think if the institutions themselves would take up the matter from the side of the employees who attend to the patients it would be a good thing. That class has not been touched as yet by the law, according to the opinion of the Attorney-General, and if that is so it behooves our institutions to look after the interests of that class, so that it will not be necessary to have any laws made. I think the institutions can do this much better for themselves than to have the laws made for them. I think we can arrange it so as to please the employees better and to give greater flexibility. The eight-hour law, since it has been found to apply to servants, cooks, etc., has annoyed some of us a great deal. I believe that this will continue unless the law is changed. The institutions will either be put in the attitude of breaking the law pretty nearly every week or every day of the week, or they will be put to much unnecessary expense.

As to the increase of wages, there is no doubt that the wages in many departments of our institutions not only *should* be increased but *must* be increased. The State Colony for the Insane in fourteen months averaged to change employees five and one-half times. That itself shows that we were not paying enough. People will not stay, and there is no question but what changes would be less rapid if we paid more. We pay as high as some others, but the institution is new, and the facilities for getting to and from the place are not good. In such a case I think there is no doubt that the wages should be raised. If you don't raise the wages you gradually have left the worst class of employees, those who can't get away. I think institutions should be in position to pick their employees.

Mr. William O. Blaney, trustee of the Medfield Insane Asylum:—It seems to me that we are locking the door after the horse has been stolen. The time to have taken action was while the eight-hour bill was pending, rather than after it had been passed. I think we might at that time, by bringing influences to bear upon

the members of the Legislature, have prevented such action, notwithstanding the fact that it is difficult to defeat any legislation introduced in the interest of organized labor.

I agree with Dr. Howard that the nurses and those who have the care of the patients should be considered before other employees, and I have always felt that they have not received sufficient compensation for the services rendered by them. I think any one who visits an institution, and sees the class of patients these attendants are obliged to care for, will admit that the position they hold is undesirable, and that they should receive more than they are paid at the present time. If there is to be any increase in wages, it should be for the nurses, and not for the employees whose hours of labor have been reduced.

The increase in the expenses of the public institutions on account of this act will, in my opinion, largely exceed \$100,000, but the responsibility must rest with the members of the Legislature who passed this act, and not with those who are obliged to comply with the law.

H. M. Quinby, M.D., superintendent of the Worcester Insane Hospital:—This whole subject of the eight-hour law, as applied to the State hospitals, is a very perplexing one, and one exceedingly difficult to adjust satisfactorily. At Worcester we have tried to the best of our ability to comply with the law as interpreted by the Attorney-General, but for various reasons have not been able to do so. This applies more especially to our farm and to our domestic service. An epidemic of measles broke out among our farm hands, soon after we had matters satisfactorily adjusted on the new basis, and we were not only deprived on short notice of a third of our hired men, but were obliged to provide hospital facilities for their care, which still further decreased our working force. In our household department we have been unable to hire sufficient help to carry the law into effect, and could we find the necessary help we should not, on account of lack of room, be able to provide accommodations for them at the hospital. Similar emergencies are likely to occur from time to time, on account of which it will be impossible to carry on these departments without requiring some of our employees to work more than the prescribed number of hours; but whether, in a test case, such would be considered cases of "extraordinary emergency," and so absolve us from the penalties of the law, I am in doubt.

I agree with the gentlemen who opened the discussion in saying that if there is any change to be made in the hours of labor, or

any increase of wages at the institutions, it should apply to the nurses of all others. I do not believe, however, that there is any call on part of the nurse for an eight-hour law, or that such a reduction of hours would be to their advantage. They are being trained for work outside of the hospital, the necessities of which preclude such short hours, or, in fact, any rigidly fixed hours of service. The ordinary family now finds it quite difficult enough to provide trained nursing for its sick, and it would be shortsighted on the part of the nurse to take an attitude in the matter of hours which would of necessity make their employment, by persons of average means, almost prohibitive. An institution, however, cannot carry on its work with one large class of employees under one system of hours and another, doing much the same class of work, under another system. If we are to place all our other employees upon an eight-hour basis, we shall be forced to do the same with our nurses.

As to wages, I am in favor of a material increase in the wages of nurses and attendants. I have always held that this question should not stand in the way of our retaining the services of a good employee, and in this I have always had the liberal support of my trustees in so far as it has rested with them. I do not believe, however, that an increase in wages is going to effect all that we wish to effect in making the position of nurse a more permanent one. To my mind something is necessary beyond wages, and more especially as regards our men. The character of the work is such that it does not appeal to men, and they are naturally led to give up the work whenever something more congenial offers. They have nothing to look forward to, however long they may remain in our employ, except, perhaps, an increase of wages. No provision is made whereby they can settle down and have their own homes and support a family should they be so inclined. Now, our most successful and most stable employees are men with families, men who live either in houses owned by the institution or in those which they rent in the near neighborhood, and it seems to me that it is only by providing such facilities for our attendants that we can hope for the desired stability among this class of our employees.

Rev. Payson W. Lyman, trustee of State Hospital and State Farm:—I have yet to meet any trustee or any superintendent who has any good word for the legislation that has taken place, which is entailing upon the State for its charities and correctional institutions a very great and needless cost. The Board which I represent is opposed to this legislation, and I can't see how any intelligent

citizen can say that it is a good thing. I can see how it can be considered good for the artisan, but not for the institution. There are eight hours of each open day when a laborer — a farm laborer or kitchen laborer — is off duty under the new law, and, of course, these are for the most part on institution premises, and it would seem to me that there are opportunities for demoralization of the force which would not occur if a more nearly natural day's labor were required. I can't see how any normal man or woman would choose to occupy himself so little as eight hours a day in work for himself.

I feel with Dr. Howard and others that if anybody needs consideration it is the attendants who are close to the difficulties of the situation, nearer than the farm laborers or kitchen laborers. Our people must be fed and our herds must be cared for, and all this necessitates an expensive duplication of employees if the eight-hour day prevails. So unnatural and unreasonable are these requirements, and such is the augmented cost, that it does not seem as if the bill could have been considered in the Legislature with any care. As has been said, we are "up against it," and perhaps we are now proposing to lock the door after the horse is gone. Nevertheless, the law can be abrogated if it becomes evident that its provisions are unreasonable and wasteful, and, as well, difficult of execution.

Dr. John H. Nichols, superintendent of State Hospital: — There is little that I can say except to endorse some of the general ideas that have been given. In regard to the hours of work of nurses, attendants and general employees, there is no doubt in my mind but that in justice to all of our employees they all should be on the same basis. The eight-hour scheme for institutions, and especially the forty-eight hours per week scheme, is a very hard thing to apply to our institutions, but I do believe that, as the other employees have been put on the eight-hour basis, the nurses and attendants should also be there. A little while ago I attended a meeting of the Nurses' Association here in Boston, and the majority of the speakers in considering some of the matters of training school work complained that it was hard work to get their nurses to pay sufficient attention to their training school work. It was hard work to get them to apply their minds to the studies and the lectures. They seemed to be tired out. And in most of these training schools (most of those represented were the training schools of the general hospitals) they were doing as we do in our hospitals, — dividing the twenty-four hours into two

shifts. So at that time I advocated putting the nurses on the eight-hour basis, as we had been required to do in the State institutions, and then there would be no question of the nurses getting tired out, exhausted at the end of the day. I believe it would be a grand good thing, as far as training schools go, if we should put our nurses on the eight-hour system, and have the training work — their studies — come outside the eight-hour day.

In regard to increase in wages, it seems almost impossible for us to get the number of officers that are necessary to carry on our work; in fact, we are getting behind the number which we should have, and the only way I can see of meeting the difficulty is to increase the wages of our employees, and especially of our nurses. During the period of probation (sometimes three months, sometimes a year) even nurses and attendants are getting less than domestic help are demanding and receiving almost anywhere to-day. It seems as though in the nursing profession there is reason for higher wages than we should be obliged to pay a domestic, because we are trying to get a higher order of intelligence, more education, and I feel that we should increase the wages to a point where it will be easy for us to get the number and also the quality of nurses that we wish.

In regard to the third question, it is a matter which we have not taken up at the State Hospital, but I think we shall have to in the near future. I hope the question will be fully discussed.

Mr. Samuel W. Hopkinson, trustee of Danvers Insane Hospital: — Of course the matter of general employment is settled by the Legislature, and while I don't object to making eight hours a day's work, I do believe that the policy of the State Board and trustees should be to oppose any law which will limit us in hiring employees for any time, and to pay them in accordance with the number of hours they really work. There are a great many people who would be glad to work twelve hours and get twelve hours' pay; the difference is in proportion to the labor which they perform. I am quite satisfied that the nurses are not calling for the eight-hour system, but I think they are entitled to be on the same basis as the other employees as to their pay.

The increase of wages has been discussed somewhat with us and has been determined upon. There is no doubt that it is absolutely necessary to do that.

In relation to married persons and their families, I am sure that that is something that should be attended to. In the case where a hospital is near a city where there are many tenements

the difficulty is not so great, but when we are in the country we must build houses and let them to employees, so as to provide for their living near the institution. We have eight or ten tenements upon the grounds; no doubt it would be well to have twenty. Men with families living near the institution are more permanent and desirable employees.

Mr. Chas. E. Ware, trustee of Massachusetts School for the Feeble-minded: — I think the last speaker has “struck the nail on the head.” It is late to do anything now. I think the only thing we can do now is to endeavor to have the law changed; the institutions should present a united front.

As I understand it, this law has been passed without any notice to the State institutions that the matter was coming up, and, furthermore, I have been credibly informed and told distinctly by members of the Legislature and members of the committee that some did not know that the matter was coming up, and they were utterly floored by the results. It seems to me that the ways and means committee should have asked the superintendents to present to them a schedule of the increased cost of this work in our institutions. This increased cost will amount, I am told, to over a million dollars in the aggregate, and requires us to do what is a physical impossibility to do, namely, to provide buildings for the additional employees, — that could not be done within twelve months. And yet, as I understand it, we are liable to criminal action every day since the law went into effect. We should take some united action toward a reconsideration of the matter, and present our objections to the Legislature, so that we shall not be criticised for objecting to the law because it cannot be carried out.

Mrs. Sarah D. Fiske, trustee of State Hospital and State Farm: — I think the new eight-hour law passed by the Legislature as it affects the State institutions is a subject that concerns the people who furnish the money to support the institutions.

I think we are asking a good deal of them to increase the expenses so much when no appropriation has been made for it. I should like to ask what we are expected to do with all these additional people during the sixteen hours off duty, and where we are to house them with so short a notice. It is very different in stores or factories, where the clerks, sales men and women, operatives, etc., return home after the day's work is over. In hospitals, where patients have to be cared for night and day and Sundays, it is very different, and also where attendants have to remain in the institutions all the time.

Dr. Owen Copp, executive officer, State Board of Insanity:— The enactment of this law may have a lesson for us. We are talking as if it might have been avoided. The general subject has been before the Legislature several years. The original law was passed with a full understanding of its effect upon State institutions. Its great increase of their cost was repeatedly presented to the ways and means committees, and I believe the latter uniformly reported against it. Nevertheless it passed. I think, however, that this year's amendment, limiting work to forty-eight hours a week, was not fully understood in its effect upon institutions.

We do not, as a rule, take interest in such matters until action has been taken. It would be better if we had a general policy which would insure foresight, early discussion and timely action. If there are conditions in our institutions which ought to be improved, we should anticipate the demands of the public and the Legislature by appropriate voluntary measures.

I have the feeling that this law was unavoidable in some form. It was much more radical at the start, being modified in its passage. Restrictive and punitive legislation of this sort is sure to be embarrassing in administration, even if right in its main purpose. This law should not be extended to nurses. They should not be put on the same plane as laborers. Their wages should be increased, their hours of work shortened, their living and social conditions improved, but I believe we can do justice by them in our own way in a much better and cheaper form than by legislation of this character, which is sure to follow if we delay and fail to take the initiative in these matters.

In the last fourteen months there were on the average 2.6 rotations in service of all employed in our institutions; 3.7 rotations of men nurses. If officers were excluded, the term of service for many employees would be considerably shortened, hardly permitting them to become acquainted with their duties. Such conditions would bankrupt any business. The waste of supplies and of the energy of officers in training these inexperienced persons is enormous. It has been impossible even to secure a sufficient number of nurses by advertising and sending officers to employment bureaus, often several times a week. There has been greater difficulty in finding the right sort of person for a nurse.

The average monthly wage for women nurses last year was \$19.51, for men, \$25.93. In four years the average scale has risen 2 per cent., although outside wages have been increasing with much greater rapidity. The prisons have paid much better wages and have furnished their employees better conditions of living.

In part, at least, our inertia is responsible for the deficiency and unsatisfactory character of our employees.

Many of them come to us just to get a start before going to some permanent occupation. They form a floating population, careless of their reputation and not amenable to the control of public sentiment. Few of them marry and make a home in or near the institution, greatly in contrast to conditions in Scotland and England, where you will find many employees who are provided with apartments and remain for years in the employment of the asylums. The whole situation should be thoughtfully considered, and some general and definite policy formulated in the hope of wisely regulating legislation.

Mr. George H. Sargent, trustee of Boston Insane Hospital:— We have a situation somewhat different from some of the other institutions, being located in a large city, where the population is very much more floating than in smaller places. We have less difficulty, perhaps, in securing help, but greater difficulty in keeping it. The question has been pretty thoroughly discussed by our trustees; we are now working on it, with the corporation counsel, hoping to arrive at some satisfactory status, but apparently we are going to be placed in the position of breaking the law and cannot help it. Our superintendent, Dr. Noyes, is here, and perhaps he will tell you something more in detail just what we are striving against in our institution.

Mr. Edmund A. Whitman, trustee of State Colony:— I agree entirely with the sentiment which Dr. Copp has expressed, but I do not think that is going to do any special good. He has expressed himself here, and has informally to me, as though there was a current which was sweeping us all along,— a current more or less irresistible,— and we must get into the current, as the best men in the Legislature are in favor of shorter hours for employees. I do not want to enter into any defence of the men referred to. They are among the younger men in the Legislature; some of them live on the Back Bay, and they know about as much of institution work or the needs of the Commonwealth as a babe unborn. They are met constantly by the argument of the labor organizations, that a man who works eight hours with the pick and shovel works enough for any man. They do not realize that an attendant in an asylum is not working with a pick and shovel, and that these attendants don't care so much whether they work eight hours as they do for what they get out of it. We are met by a very persistent and talkative lot of men, who go before the Legislature and urge this eight-hour matter so that they may use it as a lever to force shorter hours

upon contractors doing private work. They go to a contractor and say the State or the city has adopted these hours, and try to force him to adopt the same rule. It makes no difference to this particular agitator whether the people in the State institutions work eight or fifteen hours, and I have no idea but that we could go on and break the law and nothing would be said about it. These agitators are interested only in the people who belong to their unions, and the indirect influence which this legislation has on the labor organizations.

This matter comes up before the legislative committee, and not a single institution is represented. Last year, when the first eight-hour law was passed, two of the members of the Lancaster school board were present, and stated the facts as to what would happen to that particular institution by the adoption of such a law. One of the trustees said that it was her personal opinion that it was a good bill, but hoped that if it were enacted it would not apply to her institution. I am not prepared to say that it would have done any good if these trustees here assembled had been there. There is a feeling current that the laboring man is being oppressed, and that the State should rise up and help him out of what one agitator calls "the tragedy of labor."

I think it is unfortunate that this matter has not been presented to the Legislature so that they might know what the result of such legislation would be. If we are to take this legislation in good faith we have got to have some substantially different methods of treating our employees. At Gardner, for instance, we have an attendant who supervises the patients while they are at work. If we call him a teamster he must be on an eight-hour basis; if an attendant, on another basis. He is employed with the patients outdoors. When the work is over he ought to be asked to see that these patients are washed and dressed and afterwards put to bed, but if he is classed as a teamster working for the institution he cannot do this; he must work only eight hours a day.

The attendants who are working inside are not going to be long contented. When they find other people, who have no more arduous duties than they have, are better paid, they will become dissatisfied. We must have a larger force of employees in the institutions, and that means an added demand upon the taxpayer.

I am heartily in favor of carrying out this law to the utmost, even if the people in the hill towns have to pay heavier taxes. If they do not care to oppose such legislation before its passage, they must not complain if they have to help pay the bill afterwards.

Then what are we going to do with these people in the other

sixteen hours out of the twenty-four? They cannot sleep all the time. Our institution is three miles from any town or place of entertainment; there is nothing for them to do outside or inside. We shall have to see that every one gets married, and build houses for them, so that they will stay in the institutions.

I have only to say that we should formulate some policy and go before the Legislature. Something should be done to avert the logical consequences of the legislation which has been forced upon us, — legislation for which there was no call and no need.

Dr. Arthur V. Goss, superintendent of Taunton Insane Hospital: — The practical working out of the recent legislation has been occupying my attention exclusively for some time, and, like the rest, I have found it impossible to literally comply with the law.

Only about one-half of our employees can be said to be working not more than forty-eight hours a week. I think our nurses and attendants have been treated with less consideration than our other employees. They do not, like the laborer, work with pick and shovel, but they do work continually on nerve, which is far more exhausting. I think our nurses at present are working too many hours a week.

Dr. Chas. W. Page, superintendent of Danvers Insane Hospital: — It is true that some nurses have exacting duties, but I think not more than one-third of those at Danvers are called upon to take responsibilities and to perform work that is especially wearing and tearing. The fixing of the day's labor at eight hours is, of course, simply arbitrary, and has been done without any reference to the occupation of a nurse, but I realize that we have certain ward nurses who are more harassed and who endure very much more physical wear and tear than any of our outside employees. If we cannot help those who are overburdened without including the whole number, then, of course, we must consider this question of limiting the hours of the whole class.

At Danvers we attempted when the eight-hour law was first put into force to comply with it, and as we were instructed by the Attorney-General not to include nurses and attendants, we put the employees who were included on a basis which was a distinct separation from the nurses. We took the law literally as we understood it. Quite a good many work eight hours a day seven days a week. They do not have any sick time allowed or any vacation; the law did not specify that. Those attendants who remained on the old basis were allowed sick privilege. For instance, we do not deduct anything from an attendant's wages when he is sick two weeks;

if sick more than two weeks, the question of pay is referred by the superintendent to the trustees. And, of course, when an attendant has become sick as the result of special attention to duties in the hospital this sick time would be extended indefinitely. We have sent quite a number of nurses to the Salem hospital, and paid the bill as well as paid the nurse for the whole time.

We have a good number of nurses who have been working only six days a week; twenty-four hours off duty each week have been given. Many of them spend the time in the institution. A good many, especially the young women, spend most of the time in their room,—probably sleep a good part of the time and perhaps they do a little sewing. Most of the men go away, and some get into trouble. I have no doubt we have had to discharge half a dozen a year who would never have gotten into trouble if they had not had that time free. One poor fellow got intoxicated last fall (he was from some country place up in Maine), was put into jail and there committed suicide. If he had been obliged to work seven days a week probably he would have been alive and well to-day.

We give our attendants two weeks a year vacation, without loss of pay. They work nine or ten hours on an average, six days a week, but in the course of the year we give them fifty days besides the two weeks' vacation. Thus altogether there are sixty-four days in the year when we do not ask them to do a thing and yet pay them full time. All these employees get twelve months' pay for ten months' work. How many business men are there who would feel that they could afford to hire help to be treated in that way? But I feel that this is due the nurses. We must have good service. Those other employees who have been put on the eight-hour law do not have these privileges. I don't think many nurses want to be put on the eight-hour basis. There are those, of course, who would like to get a lot of money and do no work at all. Those nurses who have been long with us, and are in sympathy with the work of the institution,—they, I think, almost invariably prefer to go along under the present régime rather than to be put on the eight-hour basis. I think the Attorney-General's opinion is arbitrary. It seems as if a definition ought not to have very much weight in a legal matter of this kind. I don't see why a good many of our people who to-day are on our books as attendants or nurses do not do sufficient manual labor to be classed as working people. Logically, I think attendants ought to be put on the eight-hour law, but at the same time, for the efficiency of the institution and for the good of the nurses, I don't think it is important; in fact, I

think it is undesirable. It would unfit many of them to perform their future work outside.

We have tried to encourage married people; we have two men who have been with us a long time who have families. They are very reliable men; we pay them \$45 a month. Some two years ago or more I had about a dozen rooms fitted up on the fourth floor of the institution for the accommodation of married couples. We endeavor to arrange so that the married couples can take the day off together. But in two years' time we have gotten only three or four married couples that have been satisfactory and have remained with us. I think we have tried twenty-five, perhaps thirty or forty couples. I don't know why it is, but they are not satisfactory as a rule, and generally we have been glad to have them go. Simply providing houses or tenements for them will not make good attendants of them. There may be the right class in the community, but I think it will take time to get the right sort into the houses which we build for them. I think, however, if we had a dozen more couples like those we have found satisfactory we should feel a greater confidence in the conduct of the wards. I have been trying to find these men, but they come very slowly, and I am afraid it will always be so.

As to the increase of wages, I figured out the extra nurses we should require. In six wards in the main hospital we would not require any more employes on the eight-hour basis than to-day; at the colony we should only require three more day nurses; but there are other wards where the increased number would be so great that I don't see how we could do our work, how we could care for our patients, without increasing our force at least 33 per cent. If I am going to have a penalty of \$50 hanging over my head (though I don't see how any one can bring action) I am not going to take any chances, even with 33 per cent. I don't see as long as I am connected with the State why I should take any chances. If the trustees wish to they may do it; I am not willing.

We have treated our employees fairly well; yet we are stared in the face with the possible combination of these attendants. If they combine they can easily control the situation with this \$50 fine in their favor. I have had attendants who tried to get other attendants to leave the institution,—tried to get others to go, while the instigators intended to stay. If such power is put in their hands how long will it be before they decide when they are going to work and when they are not going to work? Then the

responsibility for the conduct of affairs cannot be placed upon the superintendent. This is a very serious aspect of the question, but I don't believe it would have made any difference with the Legislature if we had gone up and informed the members of our opinion. Apparently it was not a question of what should be done for the people, but a matter of political expediency. When the taxpayers have a union then they will be recognized as having some importance and some usefulness in the State.

Dr. Walter E. Fernald, superintendent of the Massachusetts School for the Feeble-minded:— I agree with Dr. Copp that we have failed to keep up with the popular demand as to the housing of our employees, the pay of our employees and the hours of work. I am sure that it is a fact that in most of the institutions the country over, until within a few years, the employees have been badly housed,— with small, unattractive rooms, and no recreation rooms. They have been paid less than the same class of people have been able to get in other occupations, and the hours of work have been much longer than the average in other kinds of work. I think that we have laid ourselves liable to criticism by the laboring people on that ground.

We have tried to remedy these things; we began to build nurses' homes, we slightly raised the pay, and shortened the hours more or less, but we have not kept pace with public sentiment, and we are now paying the penalty.

The rather critical attitude of the ways and means committee in regard to the amounts paid for wages and salaries is largely responsible for this state of affairs. Any increase in the amounts paid for wages is apt to involve criticism from that committee. I am sure the committee would have been appalled if our estimates this year had involved a sum adequate for strictly carrying out the eight-hour law of 1907.

Our institution is badly built, badly planned, to carry out this law. Our institution is built on the cottage or colony plan. We have twenty-four dining rooms and eight kitchens. We believed this arrangement the best one for our patients.

The Attorney-General decides that an employe who works with his hands comes under the eight-hour law. The dining-room girl who serves in the employees' dining room comes under this law. Does not the law apply equally to the attendant who performs the same work exactly in the children's dining room? Every attendant in our institution does housework; she sweeps the floors, she mends, she works with her hands.

Our employees have discussed this; they know the opinion of the Attorney-General. I feel that they only demand their rights if they insist upon being placed on the eight-hour basis if others are.

We should require 103 extra employees to carry out this law if attendants are included; if attendants are excluded we shall require 40 extra employees. The annual increase in wages would be about \$65,000, and it would take a year's time to prepare for these extra employees.

The members of our committee felt that the Legislature should listen to a formal presentation of the matter, and that it should grant a postponement in the date of beginning the operation of the law and an appropriation making it possible to erect these buildings and to pay these extra employees.

I have been told that this is the first case in the world where domestic servants and farm hands have been placed upon an eight-hour basis.

Some of our farm neighbors near our colony are protesting at the new standard of hours we are proposing to establish there. Their farm laborers are objecting to work ten hours if the men at the colony are to work eight hours per day.

Dr. John A. Houston, superintendent of Northampton State Hospital:—The market price of labor has usually controlled the wages of our domestics and the majority of employees, except our nurses and attendants. I feel with others that it is a fact that we have paid our nurses and attendants too little, but I cannot accept for our institution or for the others the liability for that state of affairs. Up to two or three years ago, with the exception of what we received for the board of private patients, our income was regulated by law; the rate, \$3.25 a week, regulated the amount of money we had to spend and what we could pay for attendants and nurses.

Of course there is a widespread feeling of unrest among the institution employees because of the application of this eight-hour law, whereas up to recently our nurses and attendants, with few exceptions, have been fairly satisfied with the hours of labor. Now they are saying that if the law does not apply to them they will not remain with us. I have talked with the attendants and said that my sympathies were with them, and that personally I did not wish them to work any longer than the other employees, but that, according to the opinion of the Attorney-General, the law did not apply to them; that presumably within a short time things

would be made much better for them. I have advised them that the trustees would probably increase their wages \$24 to \$27 a year; I think we can do that with our present appropriation the present year. The head supervisors have said that the present force of attendants would be satisfied with that.

It seems inevitable that this law will be extended to apply to the nursing force. If it does, I foresee considerable trouble. It will increase our maintenance appropriation; that, in turn, will call out a protest from the taxpayers; the legislators will heed what the taxpayers say,—they may not next year, but they will in two or three years,—and then they will cut down the appropriation. The wages of our employees will not be reduced and we shall have to retrench in what we do for our patients, and that I hope will never come to pass. We are not doing any too much for our patients now. What I wish is that this law shall not be made a matter of compulsion, so that we shall have to ask our attendants and nurses to work on the eight-hour basis, but that our appropriation may be increased enough to do this,—to make the hours a little less long than they are now and to increase the wages sufficiently to satisfy those who are working in the capacity of nurses. This would be better than to shorten the hours of labor. Many attendants come from a long distance and they do not know what to do with their extra time. At Northampton we have always given two weeks' vacation, with pay. I should recommend that we give instead of one day a week, one month a year, with pay.

I think, whether this law is passed or not to extend to the nursing force, we should pay our nurses more than we do now.

I have always made it a rule to select only such, if possible, as I would be willing to trust to care for one of my relatives or friends if he were a patient in the hospital, but recently I have had in answer to my advertisements poor specimens, even boys, who cannot get work elsewhere.

If I were at present obliged to employ a sufficient number to comply with an eight-hour, six-days-in-the-week law, I must take some of that class.

It is perhaps unfair to compare the wages of our force with those paid in institutions of correction. Perhaps it would be unreasonable to ask the taxpayer to pay that much. In those institutions they are paid up to \$1,000 and \$1,200 a year and house rent. That is as much as we pay our assistant physicians. Our best paid attendants, with a few exceptions, get \$450 per year. The difference be-

tween \$450 and \$1,200 is great. We do not pay our best men enough. We cannot keep them at \$35 per month, no matter what kind of accommodations we provide for them.

Dr. George S. Adams, superintendent of Westborough Insane Hospital:—I am in substantial agreement with the other superintendents in regard to the eight-hour law and also in regard to the hours for our nurses. The general employees are taken care of by the eight-hour law, and I practically have my hospital on the eight-hour basis. The Attorney-General said that this law did not apply to the nursing force, yet he said it included any one who worked with his hands. I think each institution can do much to modify the conditions of the nurses and make them fairly well contented. Their wages should be increased. The wages they are paid now are much less than they can get in other occupations calling for the qualifications which we want. During the twenty years I have been connected with the hospital there has been very little increase in such wages. Our men were paid from \$20 to \$30, our women, \$14 to \$20. It is a little better now, but I think there should be a substantial increase in their wages, and, as fast as circumstances will allow, a shortening of the hours. Our nurses work seventy hours a week for the seven days. I think that might be reduced somewhat without increasing very materially our nursing force.

I do not agree with Dr. Houston that we cannot get the class of persons we want. I think there are plenty in the country if we offer enough wages to get good men and women.

The trustees of our hospital are in thorough accord with me in regard to making provision for married employees and their families where it can be done. If this law should apply to the nurses we should require 84 more employees, and they must be housed. I think that small houses for the accommodation of married couples can be provided at a very slight increase over the cost of providing it in a large building.

Dr. Edward French, superintendent of Medfield Asylum:—Every one seems to be agreed that the hours of labor should be shortened and that there should be an increase in wages. At Medfield we have attempted to comply with the law, and we shall require 24 more employees, not including nurses and attendants. We have been obliged to take a building which was intended for patients for the accommodation of these extra employees; we could not comply with the law in any other way.

In regard to the third question, we have built three cottages which provide for a married family and for six nurses in the upper story of each. I think that we can provide for nurses in that way more cheaply than to put up large buildings. Our plan is to settle a married couple — attendants — in these houses, the man to work upon the wards and the woman to conduct the house as she would in any other calling in life, and take care of the rooms for the nurses. She gets her pay for the work in rent. This bids fair to be a success.

Dr. Chas. A. Drew, medical director, Asylum for Insane Criminals:— It seems that nothing is needed to establish the fact that this law is unpopular. It also seems to be shown that the merits of this law were not fully discussed before the legislative committee, and it seems to me unfortunate that what has been said here to-day was not said before the committee. I don't know about receiving this bill; I know that some members of the committee said that it was advertised in the newspapers, and I suppose that every institution is expected to keep informed as to what laws are being passed.

Much has been said about the merits of this bill and very little about the question of what we are going to do about it. Are we going to try to have this obnoxious law repealed or amended? If the nurses and attendants are not included, are we going to advocate certain hours which will be equivalent to putting them in the same class? Are we going to ask for money sufficient to carry out the law, or are we going to have a law passed which will repeal the penalty clause of this bill? Suppose a rational, fair bill was presented, the manifest object being to equalize the hours of labor in public institutions; suppose what is said here to-day was said before the committee,— I think that a sensible law, establishing normal hours of work,— and when that is found impracticable, to pay the attendant according to the hours he is obliged to work,— I think that could be put through, retaining the main objects and doing away with the penalty feature and other objectionable features of the law.

Dr. E. V. Scribner, superintendent of Worcester Asylum:— With reference to our institution I do not find that there has been any call for lessening the hours of labor, but I do think the wage scale has been too low. In bettering the conditions of our employees I think we should consider not so much the lessening of the hours as giving better wages.

This new law has caused us more trouble at the colony than at the institution in town. The colony was established with the idea of caring for patients there, and yet in many of the buildings the increased number of employees has compelled us to take for nurses quarters originally planned for patients. I believe with others who have spoken that everything we can do to improve the welfare of our employees should be done, thus increasing the efficiency of the institution and enabling them to give better care to the patients.

This affects us particularly in the farming operations. I don't think we can carry on the work under this law. I don't think ten hours are excessive, if the people are given a proper amount for their labor.

At Worcester many of our people are very much dissatisfied with the shorter hours, and many have given up the Sunday off. I wish to repeat that I feel that our nurses have been underpaid, and that we should give them quite a considerable increase in compensation.

Mr. Ellerton James, trustee of the Wrentham State School:—Would it not be possible next year to ask the Legislature to make a special agreement with our nurses, to pay them according to a minimum scale for eight hours, and, if they wish to work more, so much an hour? Then give them a month off, putting the odd hours together?

Mr. Ira G. Hersey, trustee of Medfield Insane Asylum:—The power back of this matter comes, in my opinion, from the labor unions. In any rule which we may pass making special agreements we would not be living up to their ideals. Their idea is that the shorter the hours worked the greater number could be employed, which is one of the results that they are working for. I think that the notice of the union meeting to which Dr. Fernald referred is the key to the whole situation, and it is my opinion that before we meet here in conference another year we shall find our institutions pretty well unionized throughout the State. At Medfield we have been accustomed to have an employee there (who is a mason and not a union man) to do mason work at such hours and at such times in the year as it can be done. During this past year he has put in the foundations for a house, and also the foundations for the chimneys for the same. The contract for the superstructure has been let, and we are confronted now with the demand from the union that these foundations for the chimneys be taken out and other foundations put in by union labor. They

will let the cellar walls remain provided we promise not to do it again. That is a condition we are going to meet. Before such demands as that, this matter of wages and hours, to my mind, is insignificant. I think before our next conference we should make up our minds how we are going to meet such demands as these. When the attendants in the kitchen say that they will not work because the cook is not in the union, matters will look rather serious.

STATISTICAL TABLES.

STATISTICAL FORM FOR STATE INSTITUTIONS.

TABLE I.—*Statistical Form for State Institutions,—Prepared in Accordance with a Resolution of the National Conference of Charities and Corrections, adopted May 15, 1906.*

INSTITUTIONS.	SUPERINTENDENTS.	POPULATION.												Average Number of Officers and Employees during the Year.					
		Number of Inmates present at Beginning of Fiscal Year.			Number received during the Year.			Number discharged or died during the Year.			Number at End of the Fiscal Year.								
		M.	F.	Tot.	M.	F.	Tot.	M.	F.	Tot.	M.	F.	Tot.						
Worcester Insane Hospital,	Hosea M. Quinby, M.D.,	573	619	1,092	355	276	631	344	219	563	584	576	1,160	573	549	1,122	126	121	247
Tannton Insane Hospital,	Arthur V. Goss, M.D. ² ,	488	445	933	313	262	577	323	283	606	490	424	914	500	443	943	103	110	213
Northampton State Hospital,	John A. Houston, M.D.,	353	378	731	177	162	339	209	175	384	361	365	726	382	777	78	66	144	
Danvers Insane Hospital,	Charles W. Page, M.D.,	694	1,227	1,921	419	345	764	409	327	736	543	712	1,255	539	689	1,229	137	105	242
Westborough Insane Hospital,	George S. Adams, M.D.,	532	927	1,459	248	357	605	289	339	648	354	630	884	371	545	915	116	119	235
Worcester Insane Asylum,	Ernest V. Scribner, M.D.,	362	478	840	148	64	212	41	36	77	469	506	975	432	479	911	106	74	179
Medfield Insane Asylum,	Edward French, M.D.,	534	952	1,486	27	54	23	68	91	538	911	1,449	534	927	1,461	48	155	303	
State Colony for the Insane,	Chas. E. Thompson, M.D.,	278	125	403	85	35	120	52	9	61	311	151	462	287	129	416	47	25	72
Hospital for Epileptics,	Everett Flood, M.D.,	283	248	531	114	82	196	95	62	167	302	268	570	294	256	550	83	62	145
Foxborough State Hospital,	Chas. E. Woodbury, M.D.,	221	378	599	331	—	331	268	—	331	268	238	—	238	52	52	5	57	
School for the Feeble-minded,	Walter E. Fernand, M.D.,	648	452	1,120	118	97	215	83	34	117	763	515	1,218	688	484	1,172	73	153	226
Wrentham State School, .	George L. Wallace, M.D.,	—	—	—	11	—	11	—	1	—	10	—	9	—	9	—	2	2	4
		4,738	4,823	9,561	2,395	1,707	4,102	2,200	1,572	3,772	4,933	4,368	9,891	4,847	4,806	9,743	1,070	997	2,067

FINANCIAL STATISTICS.

VALUATION OF STATE INSTITUTIONS.

TABLE II.—*Valuation of State Institutions, Nov. 30, 1907.*

INSTITUTIONS.	REAL ESTATE.				PERSONAL ESTATE.		Total Increase for the Year.	
	Number of Acres of Land.	Value of Land.	Value of Buildings.	Total Valuation.	Increase for the Year.	Valuation.		
Insane hospitals:—								
Worcester,	409.50	\$154,000.00	\$1,404,625.10	\$1,558,625.10	\$65,677.10	\$219,973.68	\$5,358,181	
Taunton,	330.00	52,100.00	629,300.00	701,400.00	—	\$1,778,508.78	\$60,318.82	
Northampton,	511.00	56,900.00	667,150.00	724,050.00	400.00	119,837.13	1,152,001	
Danvers,	509.00	47,325.00	1,573,050.00	1,620,375.00	1,030.68	247,573.56	1,425,50	
Westborough,	708.00	51,450.00	681,175.00	732,625.00	20,500.00	155,011.63	4,485,37	
Totals,	2,467.60	\$361,775.00	\$4,902,900.10	\$5,264,675.10	\$57,607.78	\$892,250.90	\$11,454.69	
Insane asylums:—								
Worcester,	749.39	\$215,380.00	\$559,757.98	\$775,137.98	\$119,670.01	\$17,513.87	\$894,807.99	
Medfield,	471.00	27,250.60	1,448,440.67	1,475,639.67	22,394.42	238,677.02	\$29,271.85	
State Colony,	1,581.51	45,866.00	378,518.48	424,414.48	31,007.64	62,769.73	47,593.89	
Totals,	2,801.90	\$288,496.60	\$2,386,747.13	\$2,675,243.73	\$65,159.44	\$421,116.76	\$35,771.95	
Hospitals and asylums,	5,269.40	\$650,271.60	\$7,288,647.23	\$7,939,918.83	\$152,767.22	\$1,313,367.66	\$50,466.64	
Miscellaneous:—								
Insane wards, State Hospital, ¹	228.49	\$21,183.81	\$339,562.24	\$360,746.06	\$22,375.02	\$117,574.01	\$5,198.86 ¹	
Asylums for Insane Criminals, ²	351.79	19,466.69	256,250.93	275,727.62	21,643.45	90,473.38	\$478,320.07	
Hospital for Epileptics,	658.00	31,637.00	473,801.76	511,338.76	49,840.76	8,818.98	\$17,176.16	
Foxborough State Hospital,	106.00	16,500.00	293,700.00	310,200.00	18,500.00	4,244.37	36,462.43	
School for the Feeble-minded,	1,822.00	70,670.00	651,554.98	722,224.98	41,809.45	46,128.55	54,085.13	
Wrentham State School, .	450.00	26,000.00	21,000.00	47,000.00	141,313.30	10,143.13	22,024.84	
Totals,	3,616.28	\$185,457.60	\$2,041,879.91	\$2,227,337.42	\$201,168.68	\$660,368.83	\$26,609.84	
Aggregates,	8,885.68	\$835,729.10	\$9,331,627.14	\$10,167,256.25	\$363,935.90	\$1,873,736.49	\$77,076.48	

² Part of institution pro rata.¹ Decrease.

VALUATION OF STATE INSTITUTIONS.

TABLE III.—*Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1907.*

INSTITUTIONS.	PROVISIONS AND GROCERIES,		CLOTHING AND CLOTHING MATERIAL.		FURNISHINGS.		FUEL.		HEAT, LIGHT AND POWER.		TOTALS.	
	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.
Insane hospitals:—												
Worcester,	\$12,626 54	\$2,315 98	\$4,673 73	\$1,338 22	\$91,951 63	\$3,803 33	\$4,237 07	\$1,868 93	\$40 00	\$4,277 07	\$1,858 93	\$1
Taunton,	\$2,690 58	650 49	4,893 13	330 92	67,002 05	2,296 87	860 00	960 00	—	4,970 64	4,970 64	3,882 36
Northampton,	11,463 74	1,484 13	2,861 55	1,008 81	40,933 81	2,220 99	4,970 64	3,882 36	—	14,125 28	14,125 28	1,665 83
Dauphin,	5,752 39	663 52	3,065 57	143 55	87,833 84	7,866 91	14,125 28	1,665 83	—	4,927 50	4,927 50	4,085 85
Westborough,	4,669 81	653 39	2,071 61	315 37	56,869 67	2,012 90	4,927 50	4,085 85	—	—	—	—
Totals,	\$37,203 06	\$3,139 49	\$17,525 59	\$2,228 01	\$344,591 00	\$6,061 86	\$29,120 49	\$1,149 61	\$40 00	\$29,160 49	\$1,109 61	\$1
Insane asylums:—												
Worcester,	\$1,897 70	\$199 53	\$3,444 94	\$656 33	\$46,210 56	\$14,219 77	\$4,000 00	\$2,000 00	—	—	—	\$2,000 00
Medfield,	615 50	9,524 18	3,281 88	90,771 46	9,504 20	492 20	4,541 81	4,541 81	—	4,541 81	4,541 81	492 20
State Colony,	2,353 98	489 46	4,988 86	3,067 76	26,928 17	6,994 16	3,777 66	1,857 79	\$764 75	—	—	2,277 26
Totals,	\$8,009 66	\$235 57	\$17,057 98	\$371 21	\$163,910 19	\$21,213 33	\$17,281 26	\$4,349 99	\$764 75	\$18,046 01	\$18,046 01	\$4,694 46
Hospitals and asylums, ¹	\$45,212 72	\$2,813 92	\$34,583 57	\$2,599 22	\$508,501 19	\$27,275 73	\$46,401 75	\$3,200 33	\$804 75	\$47,206 50	\$47,206 50	\$3,659 85
Miscellaneous:—												
Insane wards, State Hospital, ²	\$1,885 67	\$491 06	\$3,559 00	\$1,025 27	\$48,187 64	\$538 25	\$844 59	\$7,062 52	—	—	—	\$7,062 52
Asylum for Insane Criminally ³	2,256 36	1,064 94	11,273 53	434 29	22,629 16	730 81	4,718 47	2,047 39	—	4,718 47	4,718 47	2,047 39
Hospital for Epileptics, [*]	1,805 96	291 16	2,860 25	2,066 51	62,266 39	6,781 91	8,445 35	7,286 08	\$115 35	8,560 70	8,560 70	7,334 131
Foxborough State Hospital, [*]	1,345 61	222 23	1,317 66	601 49	23,614 48	6,811 76	1,433 55	2,256 75	445 57	1,879 12	1,879 12	2,347 09
School for the Feeble minded, [*]	1,762 45	17 91	3,990 90	2,646 46	66,602 25	6,842 16	8,334 13	1,024 87	575 00	8,333 13	8,333 13	1,049 87
Wrentham State School, [*]	45 00	45 00	95 00	95 00	1,808 91	1,808 91	56 00	56 00	355 00	411 00	411 00	411 00
Totals,	\$9,101 05	\$1,450 18	\$23,396 34	\$6,575 02	\$225,108 86	\$23,483 79	\$23,881 79	\$16,126 83	\$1,491 22	\$25,373 01	\$25,373 01	\$15,335 221
Aggregates,	\$64,313 77	\$4,264 10	\$57,979 91	\$3,979 80	\$733,610 05	\$50,759 55	\$70,283 54	\$12,926 45	\$2,295 97	\$72,579 51	\$72,579 51	\$11,675 371

¹ Decrease.
² Part of institution pro rata.

TABLE III. — *Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1907* — Continued.

INSTITUTIONS.	REPAIRS AND IMPROVEMENTS.				FARM, STABLE AND GROUNDS.			
	MACHINERY AND MECHANICAL FIXTURES.		MISCELLANEOUS.		TOTALS.		PRODUCE.	
	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.
Insane hospitals:—								
Worcester,	\$53,279.70	\$2,631.11	\$1,684.15		\$54,963.85	\$2,446.96	\$17,620.00	\$1,827.00
Tannton,	46,935.00	1,000.00	—		46,985.00	1,000.00	8,359.00	1,959.50
Northampton,	21,750.00	—	—		21,750.00	—	12,974.00	1,013.50
Danvers,	86,006.14	5,185.90	—		86,006.14	5,185.90	16,624.05	2,758.05
Westborough,	42,568.09	1,533.46	1,865.00		44,433.09	1,530.81	17,637.20	6,770.45
Totals,	\$250,588.93	\$8,350.47	\$3,549.15		\$254,138.08	\$8,163.67	\$73,074.25	\$4,729.50
Insane asylums:—								
Worcester,	\$43,512.39	\$457.61	—		\$43,512.39	\$487.61	\$9,783.45	\$783.45
Medfield,	88,609.90	3,132.30	\$1,300.22		89,910.12	3,182.39	2,431.50	2,701.50
State Colony,	4,333.04	672.07	\$2,407.13		6,760.17	1,642.87	6,066.00	202.50
Totals,	\$136,475.33	\$3,316.76	\$3,707.35		\$140,182.68	\$4,337.65	\$40,280.95	\$3,687.45
Hospitals and asylums,								
	\$387,064.26	\$5,033.71	\$7,256.50		\$394,320.76	\$3,826.02	\$113,355.20	\$8,416.95
Miscellaneous:—								
Inane wards, State Hospital, ¹	\$48,622.13	\$2,326.76	—		\$48,022.13	\$2,326.76	\$5,341.82	\$568.50
Asylum for Insane Criminals, ²	29,740.72	3,122.51	—		29,740.72	3,122.51	5,559.83	100.17
Hospital for Epileptics,	45,982.60	870.69	\$1,127.50		47,110.10	1,164.81	10,340.00	401.50
Foxborough State Hospital,	86.40	49.130 ¹	\$1,124.00		2,020.40	292.62	5,239.50	650.00
School for the Feeble-minded,	26,324.60	3,160.00	\$39.05		27,523.65	2,155.34	10,427.50	60.25
Wrentham State School,	—	—	—		—	—	1,152.00	1,152.00
Totals,	\$151,566.45	\$8,988.66	\$2,860.55		\$154,417.00	\$8,972.04	\$38,060.65	\$1,674.92
Aggregates,								
	\$538,650.71	\$3,954.95	\$10,107.05		\$548,737.76	\$5,146.02	\$151,415.85	\$10,091.87

¹ Part of institution pro rata.¹ Decrease.² Jan.

VALUATION OF STATE INSTITUTIONS.

TABLE III.—*Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1907—Continued.*

INSTITUTIONS.	AGRICULTURAL IMPLEMENTS.		FARM, STABLE AND GROUNDS—Con.		TOTALS.	
	CARRIAGES AND MISCELLANEOUS.					
	Amount.	Increase.	Amount.	Increase.	Amount.	Increase.
Insane hospitals:—						
Worcester,	\$6,533 08	\$2,307 32	\$5,100 55	\$37,337 48	\$1,679 09	\$1,679 09
Taunton,	5,832 70	4,510 00	560 00	22,969 40	929 01	929 01
Northampton,	5,965 00	1,848 00	—	35,924 82	4,568 33	4,568 33
Danvers,	7,302 91	873 64	5,284 20	40,336 91	5,570 14	5,570 14
Westborough,	5,263 94	544 01	1,988 35	35,670 29	10,828 35	10,828 35
Totals,	\$33,957 63	\$337 95	\$12,933 10	\$172,238 97	\$14,358 73	\$14,358 73
Insane asylums:—						
Worcester,	\$3,316 17	\$566 77	—	\$17,929 45	\$1,494 32	\$1,494 32
Medfield,	4,003 00	239 00	—	33,077 27	3,944 02	3,944 02
State Colony,	3,506 25	1,010 75	\$1,983 97	15,608 02	2,536 08	2,536 08
Totals,	\$10,825 42	\$184 98	\$1,983 97	\$68,614 74	\$5,974 42	\$5,974 42
Hospitals and asylums,	\$44,783 05	\$162 97	\$14,917 07	\$238,853 71	\$20,333 15	\$20,333 15
Miscellaneous:—						
Insane wards, State Hospital, ²	\$3,555 92	\$390 19	—	\$12,767 52	\$557 30	\$557 30
Asylum for Insane Criminally, ³	5,003 42	264 10	—	19,255 50	2,216 94	2,216 94
Hospital for Epileptics,	4,618 02	198 02	—	24,362 52	3,569 82	3,569 82
Foxborough State Hospital,	3,746 69	140 75	\$82 50	10,770 64	213 58	213 58
School for the Feeble-minded,	9,808 56	3,245 11	369 60	20,707 16	4,335 76	4,335 76
Wrentham State School,	923 22	923 22	—	2,639 47	2,639 47	2,639 47
Totals,	\$27,805 83	\$5,161 39	\$452 10	\$97,582 81	\$13,592 87	\$13,592 87
Aggregates,	\$72,678 88	\$5,008 42	\$15,369 17	\$336,436 52	\$33,926 02	\$33,926 02

² Part of institution pro rata.¹ Decrease.

VALUATION OF STATE INSTITUTIONS.

TABLE III. — *Classified Valuation of Personal Property at the State Institutions, Nov. 30, 1907 — Concluded.*

INSTITUTIONS.	MISCELLANEOUS.		TOTAL VALUATION OF PERSONAL PROPERTY.		PRIVATE FUNDS.	
	Amount.	Amount.	Increase.	Amount.	Increase.	
Insane hospitals:—						
Worcester,	\$14,143.38	\$219,973.68	\$5,358.18	\$8,290.04	\$188.35	
Taunton,	4,364.85	149,765.01	1,152.00	—	—	
Northampton,	1,972.60	119,837.13	1,025.50	606.16	53.92	
Danvers,	10,433.42	247,573.55	3,454.69	—	—	
Westborough,	6,469.56	155,101.53	16,724.68	—	—	
Totals,	\$37,393.71	\$892,250.90	\$14,694.69	\$8,896.20	\$242.27	
Insane asylums:—						
Worcester,	\$2,674.97	\$119,670.01	\$17,613.87	—	—	
Medfield,	2,131.81	238,677.02	1,671.23	—	—	
State Colony,	2,488.72	62,769.73	16,386.85	—	—	
Totals,	\$7,295.50	\$421,116.76	\$35,771.95	—	—	
Hospitals and asylums,	\$44,689.21	\$1,313,367.66	\$50,466.64	\$8,896.20	\$242.27	
Miscellaneous:—						
In sane wards, State Hospital, ²	\$2,007.45	\$117,574.01	\$5,198.86	—	—	
Asylum for Insane Criminals, ²	569.64	90,473.38	8,818.98	—	—	
Hospital for Epileptics,	12,816.29	150,772.21	4,244.37	—	—	
Foxborough State Hospital,	5,180.64	46,128.56	3,524.84	—	—	
School for the Feeble-minded,	4,797.73	141,343.30	10,143.13	\$67,355.78	\$8,693.62	
Wrentham State School, . . .	18.00	5,077.38	5,077.38	—	—	
Totals,	\$25,389.75	\$560,368.83	\$26,609.84	\$67,355.78	\$8,693.62	
Aggregates,	\$70,078.96	\$1,873,736.49	\$17,076.48	\$76,251.98	\$8,395.89	

² Part of institution pro rata.¹ Decrease.

TABLE IV.—*General Statement as to Special Appropriations.*

INSTITUTIONS.	Whole Appropriations.	EXPENDED DURING FISCAL YEAR ENDING NOV. 30, 1907.					
		BUILDINGS FOR PATIENTS.		BUILDINGS FOR NURSES.		BUILDINGS FOR FARM, STABLE AND GROUNDS.	
		Land.	New and Additions.	New and Repairs.	Additions.	New and Repairs.	Additions.
Insane hospitals:							
Worcester,	\$85,600 00	-		\$41,174 70	-	\$23,860 57	-
Taunton,	15,300 00	-		-	-	1,200 00	-
Northampton,	44,300 00	\$3,759 74	\$1,021 60	-	-	-	1,021 60
Danvers,	126,800 00	4,334 39	-	-	-	-	20,945 97
Westborough,	156,500 00	\$400 00	-	-	-	-	-
Totals,	\$428,600 00	\$12,159 74	\$5,355 99	\$41,174 70	-	\$6,380 57	\$911 15
Insane asylums:							
Worcester,	\$251,500 00	-		\$7,494 10	-	\$2,490 16	-
Medfield,	177,425 49	-		681 75	\$1,239 13	-	\$748 72
State Colony,	314,400 00	-		15,638 46	-	-	14,624 02
Totals,	\$740,325 49	-	\$23,814 31	\$1,239 13	-	7,691 48	2,716 10
Hospitals and asylums,							
\$1,168,925 49	\$12,159 74	\$29,170 30	-	\$42,413 83	-	\$11,181 64	-
Miscellaneous:	\$35,000 00	-		\$1,658 45	-	\$18,088 84	-
Asylum for Inmate Criminals,	172,500 00	-		\$54,163 06	-	\$33,100 42	\$911 15
Hospital for Epileptics,	149,200 00	-		6,667 43	-	-	-
Foxborough State Hospital,	317,800 00	\$1,739 25	21,148 30	29,466 81	-	11,988 14	-
School for Feeble-minded,	75,000 00	36,973 00	10,883 30	-	1,600 00	2,100 00	-
Wrentham State School,	-	-	-	-	-	-	-
Totals,	\$749,500 00	\$38,712 25	\$92,762 69	\$31,124 26	-	\$11,139 25	\$246 50
Aggregates.	\$1,909,425 49	\$50,871 99	\$121,922 39	\$73,533 09	-	\$28,681 46	\$84,342 80

TABLE IV.—*General Statement as to Special Appropriations—Continued.*

INSTITUTIONS.	FURNISHING AND EQUIPPING.						TOTAL.	
	FOR PATIENTS.		FOR NURSES.		FOR ALL OTHER PURPOSES.			
	First Furnishing and Equipping.	Repairs and Renewals.	First Furnishing and Equipping.	Repairs and Renewals.	First Furnishing and Equipping.	Repairs and Renewals.		
SPECIAL APPROPRIATIONS.								
Insane hospitals:—								
Worcester,	\$227 25		\$2,079 25				\$2,079 25	
Taunton,								
Northampton,								
Danvers,								
Westborough,								
Totals,	\$227 25		\$2,079 25					
Insane asylums:—								
Worcester,	\$5,067 90						\$9,019 92	
Medfield,							\$9,354 11	
State Colony,	2,725 54						6,936 48	
Totals,	\$7,945 34						4,626 46	
Hospitals and asylums,								
	\$8,172 59		\$2,079 25					
Miscellaneous:—								
Asylum for Insane Criminally, Hospital for Epileptics, Foxborough State Hospital, School for the Feeble-minded, Wrentham State School,	\$649 27 4,000 00 2,416 47 747 08						\$1,134 37 4,416 80 2,416 47 5,980 58	
Totals,	\$7,812 82							
Aggregates,	\$15,985 41		\$2,079 25					

SPECIAL APPROPRIATIONS.

TABLE IV.—General Statement as to Special Appropriations—Continued:

INSTITUTIONS.	EXPENDED DURING FISCAL YEAR ENDING Nov. 30, 1907.			
	WATER SUPPLY EXCLUSIVE OF PLUMBING IN BUILDINGS.		SEWERAGE EXCLUSIVE OF PLUMBING IN BUILDINGS.	
	Extension.	Repairs.	Extension.	Repairs.
MISCELLANEOUS.				
Insane hospitals:—				
Worcester,				
Taunton,				
Northampton,				
Danvers,				
Westborough,				
Totals,				
Insane asylums:—				
Worcester,				
Medfield,				
State Colouy,				
Totals,				
Hospitals and asylums,				
Miscellaneous:—				
Asylum for Insane Criminals,				
Hospital for Epileptics,				
Foxborough State Hospital,				
School for the Feeble-minded,				
Wrentham State School, .				
Totals,				
Aggregates,				

SPECIAL APPROPRIATIONS.

TABLE IV.—General Statement as to Special Appropriations—Concluded.

INSTITUTIONS.	EXPENSED DURING FISCAL YEAR ENDING Nov. 30, 1907—Con.			Total Expenditures to Date.	Balance at end of Current Fiscal Year.	Balance Specially Authorized Funds.			
	TOTAL EXPENDITURES.		Repairs and Renewals.						
	Adding to Original Value.								
Insane hospitals:—									
Worcester,	\$46,814.52	\$1,969.15	\$46,814.52	\$70,180.15	\$15,410.85	—			
Taunton,	3,981.86	2,148.98	6,951.01	13,479.35	1,620.65	—			
Northampton,	9,626.67	—	11,775.65	20,788.58	20,788.58	\$750.70			
Danvers,	5,238.98	—	5,238.98	91,849.88	34,950.12	—			
Westborough,	44,326.36	—	44,326.36	127,489.62	29,410.38	—			
Totals,	\$109,988.39	\$4,118.13	\$114,106.52	\$326,519.42	\$102,080.58	\$750.00			
Insane asylums:—									
Worcester,	\$21,082.47	\$9,354.11	\$30,436.58	\$233,649.67	\$17,850.33	—			
Medfield,	22,533.38	—	22,533.38	172,322.18	5,103.31	—			
State Colony,	35,351.06	—	35,351.06	302,721.01	8,678.99	—			
Totals,	\$78,966.91	\$9,354.11	\$88,321.02	\$108,632.86	\$31,632.63	—			
Hospitals and asylums,									
	\$188,955.30	\$13,472.24	\$202,427.54	\$1,035,212.28	\$133,713.21	\$750.00			
Miscellaneous:—									
Asylum for Insane Criminals,	\$14,129.00	—	\$14,129.00	\$18,904.80	\$16,095.20	—			
Hospital for Epileptics,	61,324.39	\$652.28	61,976.67	151,729.14	20,770.86	—			
Foxborough State Hospital,	38,844.96	—	38,844.96	120,654.87	19,545.13	—			
School for the Feeble-minded,	77,034.46	—	77,034.46	236,946.01	80,884.99	—			
Wrentham State School, .	58,178.50	1,996.73	60,175.23	60,175.23	14,824.77	—			
Totals,	\$249,511.31	\$2,649.01	\$252,160.32	\$58,409.05	\$152,090.95	—			
Aggregates,	\$438,466.61	\$16,121.25	\$454,587.86	\$1,623,621.33	\$285,804.16	\$750.00			

RECEIPTS OF STATE INSTITUTIONS.

TABLE V.—Receipts of State Institutions during the Fiscal Year ending Nov. 30, 1907 (Available for Maintenance the Following Year, under Section 2, Chapter 175, Acts of 1905).

INSTITUTIONS.	RECEIPTS FOR SUPPORT:				OTHER RECEIPTS ON ACCOUNT OF			
	Town.	Reimburs-ing.	Private.	Soldiers' Relief.	Total.	Salaries, Wages and Labor.	Food.	Clothing and Clothing Material.
Insane hospitals:—								
Worcester,	\$2,028 97	\$14,576 85	\$49,473 55	—	\$66,079 37	—	\$64 43	\$438 55
Taunton,	196 58	11,647 00	18,039 01	—	29,942 59	104 17	394 26	
Northampton,	—	11,659 79	30,465 88	\$155 52	42,421 19	147 05	219 48	
Denver,	—	18,185 87	32,775 16	—	50,961 03	90 50	791 23	
Westborough,	1,610 14	11,174 50	53,087 91	—	65,872 55	5 51	438 73	406 51
Totals,	\$3,835 69	\$67,444 01	\$183,841 51	\$155 52	\$255,276 73	\$27 07	\$844 88	\$2,250 03
Insane asylums:—								
Worcester,	—	\$5,138 02	—	—	\$5,138 02	—	\$292 03	\$381 63
Medfield,	—	5,716 60	—	—	5,716 60	—	622 83	1,076 00
State Colony,	—	617 67	—	—	617 67	—	—	34 59
Totals,	—	\$11,472 29	—	—	\$11,472 29	—	\$914 86	\$1,492 31
Hospitals and asylums,								
Hospitals,	\$3,835 69	\$78,916 30	\$183,841 51	\$155 52	\$266,749 02	\$27 07	\$1,759 74	\$3,742 34
Miscellaneous:—								
State Hospital, ¹	—	—	—	—	—	—	—	—
State Farm, ¹	\$33,907 59	\$987 45	\$7,839 30	\$155 53	\$42,789 87	—	\$89 12	\$273 63
Hospital for Epileptics,	13,333 83	66 64	1,314 84	—	14,775 31	—	4 48	1 08
Foxborough State Hospital,	103,797 74	1,387 55	21,935 56	—	127,140 85	63 00	11 82	1,049 70
School for the Feeble-minded,	—	—	—	—	—	—	—	—
Totals,	\$150,999 16	\$2,441 64	\$31,169 70	\$155 53	\$184,706 03	\$73 00	\$105 42	\$1,324 41
Aggregates,	\$154,834 85	\$81,357 94	\$214,951 21	\$311 06	\$451,465 05	\$100 07	\$1,865 16	\$5,066 75

¹ Includes all departments.

TABLE V.—*Receipts of State Institutions during the Fiscal Year ending Nov. 30, 1907, etc.—Concluded.*

INSTITUTIONS.	Furnishings.	Heat, Light and Power.	Repairs and Improvements.	OTHER RECEIPTS ON ACCOUNT OF—Con.		Total Receipts.
				Farm, Stable and Grounds.	Miscellaneous.	
Insane hospitals:—						
Worcester,	\$11,63	—	—	\$4,460 53	\$9,159 99	\$75,239 36
Taunton,	4 38	—	—	1,083 11	2,181 45	32,124 04
Northampton,	—	—	—	1,664 09	3,324 20	45,745 39
Danvers,	—	—	—	812 67	2,848 06	53,809 09
Westborough,	—	—	—	207 81	862 33	68,255 29
Totals,	\$16 01	\$60 75	\$939 33	\$8,128 21	\$7,630 16	\$19,896 44
Insane asylums:—						
Worcester,	\$118 62	\$312 61	\$6 60	\$1,154 62	\$410 02	\$1,238 30
Medfield,	2 70	6 00	—	\$1,202 76	1,352 35	4,691 86
State Colony,	—	—	—	98 30	71 68	213 27
Totals,	\$121 32	\$318 61	\$6 60	\$1,155 68	\$1,834 05	\$17,615 72
Hospitals and asylums,						
Miscellaneous:—	—	—	—	—	—	\$1,152 27²
State Hospital, ¹	—	—	—	—	—	15,928 33
State Farm, ¹	—	—	—	—	—	43,809 22
Hospital for Epileptics,	—	—	—	—	—	15,777 28
Foxborough State Hospital,	—	—	—	—	—	129,696 93
School for the Feeble-minded,	80	\$163 86	\$1 00	\$186 86	\$465 59	\$1,152 27 ²
Totals,	\$4 95	\$163 86	\$11 00	\$971 59	\$1,923 17	\$21,658 00
Aggregates,	\$142 28	\$543 22	\$956 93	\$10,555 48	\$11,387 38	\$47,697 87

¹ Includes all departments.² Not credited to institutions.

TABLE VI.—*Expenses for Maintenance and Net Weekly Per Capita for the Fiscal Year ending Nov. 30, 1907.*

INSTITUTIONS.	AVERAGE NUMBER OF PATIENTS.	SALARIES, WAGES AND LABOR ON PAY ROLL.				FOOD.			
		EXPENSES.	RECEIPTS.	NET EXPENSES.	WEEKLY PER CAPITA.		EXPENSES.	RECEIPTS.	NET EXPENSES.
					1907.	FIVE YEARS' AVERAGE 1902-6.			
<i>Insane hospitals:—</i>									
Worcester,	1,132	\$98,703 85	—	\$93,703 85	\$1,591 9	\$1,400 00	\$77,717 28	\$64 43	\$77,652 85
Taunton,	938	74,805 98	—	74,805 98	1,488 5	1,488 5	53,342 06	104 17	53,337 89
Northampton,	773	59,671 86	\$9 21	59,662 65	1,484 83	1,274 7	41,318 32	147 05	41,171 27
Danvers,	1,232	102,612 82	12 35	102,600 47	1,601 5	1,318 0	54,434 83	90 50	54,344 33
Westborough,	907	88,150 07	6 51	88,144 56	1,868 9	1,668 2	55,144 98	438 73	54,106 25
Totals and averages,	4,982	\$418,944 58	\$27 07	\$418,917 51	\$1,617 0	\$1,403 7	\$233,957 47	\$844 88	\$283,112 59
<i>Inebane asylums:—</i>									
Worcester,	923	\$67,013 15	—	\$67,013 15	\$1,381 3	\$1,238 6	\$43,472 99	\$292 03	\$43,180 96
Medfield,	1,436	109,704 33	—	109,704 33	1,449 0	1,022 6	50,300 18	622 83	48,877 35
State Colony,	428	28,629 17	—	28,629 17	1,286 4	—	15,350 28	—	15,350 28
Totals and averages,	2,817	\$205,346 65	—	\$205,346 65	1,401 8	1,136 7	\$128,923 45	\$914 86	\$128,008 59
Hospitals and asylums,	7,799	\$624,291 23	\$27 07	\$624,264 16	\$1,533 6	\$1,322 8	\$42,880 92	\$1,759 74	\$411,121 18
<i>Miscellaneous:—</i>									
State Hospital,	1,715	\$67,994 49	—	\$67,994 49	\$0,762 4	\$0,681 0	\$73,419 31	—	\$73,419 31
State Farm,	1,835	65,000 00	—	65,000 00	0,615 0	0,615 0	63,095 97	—	63,095 97
Hospital for Epileptics,	558	53,334 53	—	53,334 53	1,838 1	1,732 2	30,727 24	\$89 12	30,638 12
Foxborough State Hospital,	254	25,846 45	\$10 00	25,836 45	1,956 1	2,008 4	17,732 34	4 48	17,727 86
School for the Feeble-minded,	1,187	8,448 87	63 00	87,425 87	1,417 5	—	53,113 35	11 82	53,701 53
Wrentham State School,	9	2,215 08	—	2,215 08	2,215 08	—	753 32	—	753 32
Totals and averages,	5,558	\$301,879 42	\$73 00	\$301,806 42	\$1,045 91	—	\$25,441 53	\$105 42	\$245,336 11
Aggregate,	13,357	\$926,170 65	\$100 07	\$926,070 58	\$1,334 21	—	\$658,322 45	\$1,865 16	\$656,457 29

1 Exclusive of Wrentham.

EXPENSES FOR MAINTENANCE, ETC.

TABLE VI.—*Expenses for Maintenance, etc.*—Continued.

INSTITUTIONS.	FOOD—CON.				CLOTHING AND CLOTHING MATERIAL.				WEEKLY PER CAPITA. 1907. Five Years' Average 1902-6.	
	WEEKLY PER CAPITA.		EXPENSES.	RECEIPTS.	NET EXPENSES.	1907.		FIVE YEARS' AVERAGE 1902-6.		
	1907.	Five Years' Average 1902-6.								
Insane hospitals: —										
Worcester,	\$1,3192	\$1,1094	\$12,743.46	\$438.55	\$12,304.91	\$0.2091	\$0.1703			
Taunton,	1,1825	1,0559	4,388.94	344.26	3,989.68	0.0818	0.1063			
Northampton,	1,0243	0.9977	4,935.47	219.48	4,715.99	0.1188	0.1201			
Danvers,	0.8433	0.8823	12,851.27	791.23	12,060.04	0.1882	0.1236			
Westborough,	1,1809	1,0555	5,628.99	406.51	5,222.48	0.1197	0.0943			
Totals and averages,	\$1,0928	\$1,0241	\$10,603.13	\$2,250.03	\$38,353.10	\$0.1480	\$0.1276			
Insane asylums: —										
Worcester,	\$0.8900	\$1,0467	\$9,397.22	\$381.63	\$9,015.59	\$0.1858	\$0.2152			
Medfield,	0.9097	0.8556	16,166.48	1,076.09	15,090.39	0.1993	0.1940			
State Colony,	0.7167	..	5,034.07	34.50	4,999.48	0.2246	—			
Totals and averages,	\$0.8739	\$0.9114	\$30,597.77	\$1,492.31	\$29,105.46	\$0.1987	\$0.1997			
Hospitals and asylums,										
Hospitals and asylums,	\$1.0138	\$0.9589	\$71,200.90	\$3,742.34	\$67,458.66	\$0.1663	\$0.1497			
Miscellaneous: —										
State Hospital,	\$0.8233	\$0.7729	\$13,214.99	—	\$13,214.99	\$0.1482	\$0.1809			
State Farm,	0.7241	0.6824	20,342.99	—	20,342.99	0.2132	0.1910			
Hospital for Epileptics,	1,0559	0.8977	3,512.04	273.63	3,238.41	0.1116	0.1101			
Foxborough State Hospital,	1,3222	1,0516	2,169.46	1,08	2,158.38	0.1634	0.1234			
School for the Feeble-minded,	0.8700	0.8072	9,681.47	1,049.70	8,631.77	0.1398	0.1377			
Wrentham State School,	—	—	149.85	—	149.85	—	—			
Totals and averages,	\$0.8562	—	\$49,060.80	\$1,324.41	\$47,736.39	\$0.1654	—			
Aggregates,	\$0.9458	—	\$120,261.70	\$5,066.75	\$115,194.95	\$0.1660	—			

1 Exclusive of Wrentham.

EXPENSES FOR MAINTENANCE, ETC.

TABLE VI.—*Expenses for Maintenance, etc.—Continued.*

INSTITUTIONS.	Expenses.	Receipts.	Net Expenses.	WEEKLY PER CAPITA.		
				1907.	Five Years' Average 1902-6.	FURNISHINGS.
Insane hospitals:—						
Worcester,	\$11,255.58	\$11.63	\$11,243.95	\$0.1910	\$0.1559	Crockery, Glassware, Cutlery, etc.
Tannion,	9,364.56	—	9,564.66	0.1961	0.1755	\$0.0177
Northampton,	4,836.56	4.38	4,832.18	0.1202	0.1446	0.0099
Danvers,	11,414.14	—	11,414.14	0.1782	0.1848	0.0113
Westborough,	12,031.43	—	12,031.43	0.2551	0.1887	0.0124
Totals and averages,	\$49,102.27	\$16.01	\$49,086.26	\$0.1895	\$0.1703	0.0107
Insane asylums:—						
Worcester,	\$6,531.56	—	\$6,531.66	\$0.1346	\$0.1722	\$0.0118
Medfield,	5,982.36	\$118.62	4,963.74	0.0656	0.0255	0.0153
State Colony,	4,265.80	2.70	4,263.10	0.1915	—	0.0165
Totals and averages,	\$15,879.72	\$121.32	\$15,758.40	\$0.1076	\$0.1496	0.0122
Hospitals and asylums,	\$64,981.99	\$137.33	\$64,844.66	\$0.1599	\$0.1639	0.0180
Miscellaneous:—						
State Hospital,	\$11,207.22	—	\$11,207.22	\$0.1257	\$0.1127	\$0.004
State Farm,	6,080.47	—	6,080.47	0.0637	0.0373	0.0095
Hospital for Epileptics,	5,152.37	\$4.15	5,148.22	0.1774	0.1352	0.0056
Foxborough State Hospital,	3,969.27	—	3,969.27	0.3005	0.0688	0.0274
School for the Feeble-minded,	10,423.82	0.80	10,423.02	0.1689	0.1382	0.0150
Wrentham State School,	22.20	—	22.20	—	0.0811	0.0250
Totals and averages,	\$36,855.35	\$4.95	\$36,850.40	\$0.1271	—	0.0126
Aggregates,	\$101,837.34	\$142.28	\$101,695.06	\$0.1465	—	—

1 Exclusive of Wrentham.

TABLE VI.—*Expenses for Maintenance, etc.—Continued.*

INSTITUTIONS	HEAT, LIGHT AND POWER.						COAL.			TOTAL CONSUMPTION WEEKLY PER CAPITA.				
	Receipts.		Net Expenses.	1907.	WEEKLY PER CAPITA		SOFT.		HARD.		Quantity Long Tons.	Average Price.	Cost.	
	Expenses.	Years' AVERAGE 1902-6.			Quantity Long Tons.	Average Price.	Quantity Long Tons.	Average Price.	Quantity Long Tons.	Average Price.				
Insane hospitals:—														
Worcester,	\$21,453	54	—	\$21,453	54	\$0.3644	\$0.4292	3,974	\$4.63	282	\$6.48	.07	\$0.3438	
Taunton,	18,459	20	—	18,459	20	0.3784	0.4024	3,170	4.52	440	6.59	.07	0.3442	
Northampton,	12,655	24	—	12,655	24	0.3143	0.3684	2,788	4.23	49	7.26	.07	0.3029	
Danvers,	20,969	75	\$60	20,969	75	0.3264	0.3011	4,392	4.56	349	6.25	.07	0.3464	
Westborough,	18,438	09	..	18,438	09	0.3309	0.3291	4,933	4.2	519	7.41	.12	0.4546	
Totals and averages,	\$91,975	78	\$60	75	\$91,915	03	\$0.3548	\$0.3648	19,257	\$4.27	1,639	6.50	.08	\$0.3584
Insane asylums:—														
Worcester,	\$22,402	46	—	\$22,402	46	\$0.4618	\$0.3015	4,067	\$4.50	500	\$6.80	.09	\$0.4472	
Medfield,	25,331	66	—	25,331	66	0.319	0.2409	4,991	4.44	382	6.21	.07	0.3238	
State Colony,	10,003	57	6	10,003	57	0.4492	—	1,767	4.36	211	6.96	.09	0.4123	
Totals and averages,	\$57,737	69	\$318	61	\$57,419	08	\$0.3920	\$0.2587	10,825	\$4.45	1,093	\$6.62	.08	\$0.3781
Hospitals and asylums,	\$149,713	47	\$379	36	\$149,334	11	\$0.3682	\$0.3328	30,082	\$4.33	2,732	\$6.55	.08	\$0.3655
Miscellaneous:—														
State Hospital,	\$25,816	74	—	\$25,816	74	\$0.2895	\$0.3506	—	—	—	—	.06	\$0.2764	
State Farm, ¹	37,132	42	—	37,132	42	0.3891	0.2783	—	—	—	—	—	0.3469	
Hospital for Epileptics,	12,030	41	—	12,030	41	0.4167	0.3627	2,325	—	194	—	.09	0.4018	
Foxborough State Hospital,	12,518	07	\$163	86	12,354	21	0.3354	0.8096	2,445	\$4.65	151	\$6.40	.20	0.9334
School for the Feeble-minded,	13,061	28	—	13,061	28	0.2116	0.2629	2,223	4.81	164	6.95	.04	0.1917	
Wrentham State School,	153	24	—	153	24	—	—	—	—	—	—	—	—	
Totals and averages,	\$100,772	16	\$163	86	\$100,608	30	\$0.3487	—	6,993	\$4.72	509	\$6.71	.07	\$0.3243
Aggregates,	\$250,455	63	\$543	22	\$249,942	41	\$0.3601	—	37,075	\$4.38	3,241	\$6.57	.08	\$0.3584

¹ Includes short tons.² 17% anthracite screenings.³ Short tons.⁴ Exclusive of Wrentham, State Hospital, State Farm, Hospital for Epileptics and Wrentham.⁵ Exclusive of Wrentham, State Hospital and State Farm.⁶ Exclusive of Wrentham, State Farm, Hospital for Epileptics and Wrentham.⁷ Exclusive of Wrentham and State Farm.

EXPENSES FOR MAINTENANCE, ETC.

TABLE VI.—*Expenses for Maintenance, etc.—Continued.*

INSTITUTIONS.	REPAIRS AND IMPROVEMENTS.					
				WEEKLY PER CAPITA.		
	Expenses.	Receipts.	Net Expenses.	1907.	Five Years' Average 1902-6.	Plumbing, Steam Fitting and Supplies.
Insane hospitals:—						
Worcester,	\$15,130 10	—	\$15,130 10	\$0.2570	\$0.0387	\$0.0376
Taunton,	9,871 68	272 25	9,871 68	0.2024	0.0157	0.0224
Northampton,	5,809 88	205 23	5,537 63	0.1378	0.0234	0.0219
Danvers,	22,104 38	461 85	21,939 15	0.3428	0.2887	0.1366
Westborough,	8,676 09	—	8,214 24	0.1742	0.0275	0.0365
Totals and averages,	\$61,652 13	\$939 33	\$60,712 80	\$0.2344	\$0.0250	\$0.0563
Insane asylums:—						
Worcester,	\$11,097 22	—	\$11,097 22	\$0.2288	\$0.0215	\$0.0110
Medfield,	14,286 69	\$6 60	14,279 49	0.1886	0.0347	0.0212
State Colony,	5,806 34	—	5,806 34	0.2608	—	0.0802
Totals and averages,	\$31,188 65	\$6 60	\$31,182 05	\$0.2129	\$0.1736	\$0.0372
Hospitals and asylums,						
Miscellaneous:—						
State Hospital,	\$28,503 33	—	\$28,503 33	\$0.3186	\$0.2464	\$0.0821
State Farm,	9,547 32	—	9,547 32	0.1001	0.1046	0.0188
Hospital for Epileptics,	9,502 81	—	9,502 81	0.3275	0.2939	0.0870
Foxborough State Hospital,	7,962 34	\$1 00	7,951 34	0.6020	0.4392	0.2507
School for the Feeble-minded,	15,517 53	10 00	15,507 63	0.2512	0.2648	0.0423
Wrentham State School,	24 11	—	24 11	—	—	—
Totals and averages,	\$71,047 44	\$11 00	\$68,036 44	\$0.2358 1	—	\$0.0609 1
Aggregates,	\$163,888 22	\$956 93	\$159,931 29	\$0.2304 1	—	\$0.0542 1

¹ Exclusive of Wrentham.

EXPENSES FOR MAINTENANCE, ETC.

TABLE VI. — Expenses for Maintenance, etc. — Continued.

INSTITUTIONS.	FARM, STABLE AND GROUNDS.						WEEKLY PER CAPITA.			
	Expenses.	Receipts.	Net Expenses.	1907.	Five Years, Average 1902-6.	Carriges, Wagons and Repairs.		Fertilizers, Vines, Seeds, etc.	Cows.	Horses.
Insane hospitals:—										
Worcester,	\$19,748 90	\$4,460 53	\$15,288 37	\$0.2597	\$0.2822	\$0.0118	\$0.2025	\$0.0175	\$0.0362	\$0.0174
Taunton,	13,477 67	1,083 11	12,394 46	0.2541	0.3563	0.0149	0.1378	0.0186	0.0479	0.0051
Northampton,	15,092 96	1,564 09	13,528 87	0.2366	0.2065	0.0106	0.2007	0.0393	0.0122	0.0261
Danvers,	19,166 07	812 67	18,353 40	0.2865	0.3348	0.0046	0.1215	0.0196	0.0686	—
Westborough,	13,926 08	207 81	13,718 27	0.2509	0.2538	0.0020	0.2005	0.0410	—	0.0143
Totals and averages,	\$81,411 58	\$8,128 21	\$73,283 37	\$0.2829	\$0.3201	\$0.0086	\$0.1735	\$0.0259	\$0.0356	\$0.0116
Insane asylums:—										
Worcester,	\$12,385 65	\$154 62	\$12,231 03	\$0.2521	\$0.1043	\$0.0064	\$0.1511	\$0.0331	\$0.0141	\$0.0258
Medfield,	25,739 02	1,202 76	24,596 26	0.3249	0.2068	0.0066	0.2458	0.0143	0.0347	0.0041
State Colony,	6,836 53	98 30	6,738 23	0.3028	—	0.0307	0.1539	0.0464	0.0075	—
Totals and averages,	\$45,021 20	\$1,455 68	\$43,565 52	\$0.2974	\$0.1761	\$0.0102	\$0.2005	\$0.0254	\$0.0238	\$0.0106
Hospitals and asylums,	\$126,432 78	\$9,583 89	\$116,848 89	\$0.2881	\$0.2770	\$0.0092	\$0.1832	\$0.0257	\$0.0314	\$0.0112
Miscellaneous:—										
State Hospital,	\$11,752 66	—	\$11,752 56	\$0.1318	\$0.1476	\$0.0070	\$0.0916	\$0.0128	\$0.0027	—
State Farm,	17,478 79	—	17,478 79	0.1832	0.1828	0.0073	0.0910	0.0491	—	—
Hospital for Epileptics,	10,164 81	\$186 86	9,977 95	0.3139	0.2585	0.0115	0.1929	0.0154	—	\$0.0081
Foxborough State Hospital,	6,593 50	317 00	6,276 50	0.4752	0.5846	0.0082	0.1835	0.0397	0.0634	0.0119
School for the Feeble-minded,	20,456 96	467 73	19,989 23	0.3239	0.2521	0.0111	0.1384	0.0451	0.0044	0.0166
Wrentham State School,	461 65	—	461 55	—	—	—	—	—	—	—
Totals and averages,	\$66,908 17	\$971 59	\$65,936 58	\$0.22851	—	\$0.00851	\$0.11551	\$0.03591	\$0.00471	\$0.00541
Aggregates,	\$193,340 95	\$10,555 48	\$182,785 47	\$0.26331	—	\$0.00891	\$0.15511	\$0.03001	\$0.02031	\$0.00881

1 Exclusive of Wrentham.

EXPENSES FOR MAINTENANCE, ETC.

TABLE VI.—*Expenses for Maintenance, etc.*—Continued.

INSTITUTIONS.	Expenses.	Receipts.	Net Expenses.	WEEKLY PER CAPITA.										
				1907.	Five Years' Average 1902-6.	Freight, Expressage and Transportation.	Water.	Funeral Expenses, returning Escaped Patients, printing Annual Report.	Chapel Services and Entertainments.	Medicines and Hospital Supplies.	Tobacco.			
MISCELLANEOUS.														
In sane hospitals:—														
Worcester,	\$17,653	38	\$4,184	85	\$13,468	53	\$0.2288	\$0.0048	\$0.0130	\$0.0073	\$0.0311	\$0.0184		
Taunton,	1,496	01	509	91	16,845	10	0.3464	0.2722	0.0339	0.0067	0.0217	0.0380	0.0167	
Northampton,	10,618	13	1,017	74	9,510	39	0.2966	0.2773	0.0220	0.0727	0.0074	0.0303	0.0135	
Danvers,	21,268	09	875	33	20,362	76	0.3183	0.3350	0.0627	0.045	0.0034	0.0533	0.0089	
Westborough,	17,470	77	862	33	16,608	44	0.3521	0.3696	0.1409	0.0016	0.0047	0.0122	0.0198	0.0158
Totals and averages,	\$84,505	38	\$7,630	16	\$76,875	22	\$0.2968	\$0.0520	\$0.0673	\$0.0071	\$0.0145	\$0.0370	\$0.0145	
In sane asylums:—														
Worcester,	\$11,323	60	\$410	02	\$10,913	58	\$0.2249	\$0.0498	\$0.0344	\$0.0042	\$0.0132	\$0.0247	\$0.0119	
Medfield,	10,321	37	1,362	35	9,169	02	0.1211	0.2124	0.0016	0.0073	0.0148	0.0277	0.0134	
State Colony,	4,606	72	71	68	4,535	04	0.2038	—	0.0320	0.0024	0.0072	0.0084	0.0197	
Totals and averages,	\$26,451	63	\$1,584	05	\$24,617	64	\$0.1681	\$0.2166	\$0.0222	\$0.0118	\$0.0079	\$0.0133	\$0.0258	
Hospitals and asylums,	\$110,957	07	\$9,464	21	\$101,492	86	\$0.2503	\$0.2671	\$0.0412	\$0.0073	\$0.0140	\$0.0329	\$0.0144	
Miscellaneous:—														
State Hospital,	\$20,848	20	\$1,152	27	\$28,696	33	\$0.3218	\$0.3674	\$0.0976	\$0.0068	\$0.0057	\$0.1392	\$0.0181	
State Farm,	20,454	24	15,928	33	4,455	91	0.0474	0.2097	0.0381	—	0.0012	0.0125	0.0273	
Hospital for Epileptics,	9,413	46	465	39	8,962	87	0.3086	0.4246	0.0334	0.0101	0.0355	0.0654	0.0202	
Foxborough State Hospital,	9,649	55	504	55	9,145	00	0.6924	1.0065	0.0870	0.0782	0.0662	0.0214	0.0274	
School for the Feeble-minded,	16,687	40	933	03	15,734	37	0.2549	0.2356	0.0473	0.0311	0.0032	0.0121	0.0116	
Wrentham State School,	429	93	—	—	429	93	—	—	—	—	—	—	—	
Totals and averages.	\$86,487	78	\$19,003	77	\$67,454	01	\$0.2339	—	\$0.0597	\$0.0136	\$0.0072	\$0.0130	\$0.0678	
Aggregates,	\$197,444	85	\$28,467	98	\$168,976	87	\$0.2434	—	\$0.0489	\$0.0331	\$0.0073	\$0.0136	\$0.0474	
													\$0.0159	

¹ Exclusive of Wrentham.

EXPENSES FOR MAINTENANCE, ETC.

TABLE VI.—*Expenses for Maintenance, etc.—Concluded.*

INSTITUTIONS.	TOTAL MAINTENANCE EXPENSES.			MAINTENANCE APPROPRIATION.			Balance Reverting to State Treasury.	
	WEEKLY PER CAPITA.		Receipts of 1906.	In Addition to Such Receipts.		Total.		
	Expenses.	Receipts.		Net Expenses.	Five Years' Average 1902-6.			
Insane hospitals:—								
Worcester,	\$239,406.09	\$9,159.90	\$260,246.10	\$4,121.21	\$65,847.02	\$184,152.98	\$19,406.09	
Taunton,	203,400.00	2,181.45	201,218.55	4,125.4	4,087.8	170,236.74	..	
Northampton,	154,908.42	151,674.22	3,773.4	3,723.3	42,768.95	112,231.05	\$1,58	
Danvers,	264,881.31	2,848.06	262,033.25	4,090.2	3,777.0	216,328.26	270,000.00	
Westborough,	219,436.50	2,382.74	217,083.76	4,602.7	4,150.7	148,424.36	203,800.00	
Totals and averages,	\$1,112,152.32	\$19,896.44	\$1,092,255.88	\$4,216.2	\$3,654.6	\$83,373.39	\$1,032,290.00	
Insane asylums:—								
Worcester,	\$183,623.55	\$1,238.30	\$182,355.55	\$3,730.3	\$3,509.4	\$174,787.05	\$180,000.00	
Mcfield,	276,391.49	4,691.86	271,639.63	3,101.6	11,526.68	264,803.32	\$3,623.85	
State Colony,	81,131.48	213.27	80,918.21	3,635.8	—	83,885.69	—	
Totals and averages,	\$541,146.82	\$6,143.43	\$635,063.39	\$3,632.3	\$3,222.4	\$17,923.94	\$541,400.00	
Hospitals and asylums,	\$1,653,299.14	\$26,039.87	\$1,627,269.27	\$4,012.5	\$3.733.4	\$268,750.55	\$1,354,849.45	
Miscellaneous:—								
State Hospital,	\$261,766.84	\$1,152.27	\$260,604.57	\$2,392.2	\$2,329.5	\$250,000.00	\$11,756.84	
State Farm,	245,132.20	15,328.33	229,216.87	2,402.1	2,326.4	234,000.00	11,132.20	
Hospitals for Epileptics,	133,902.67	1,019.35	132,883.32	4,579.7	4,414.9	88,642.44	134,000.00	
Foxborough State Hospital,	86,420.98	1,001.97	85,419.01	6,467.2	6,101.5	57,657.26	7,320.98	
School for the Feeble-minded,	227,630.68	2,556.08	224,474.60	3,636.7	46,767.00	21,442.74	224,500.00	
Wrentham State School,	4,269.28	—	4,269.28	—	—	177,743.00	2,530.68	
Totals and averages,	\$958,452.65	\$21,658.00	\$936,794.65	\$3,246.61	—	\$113,567.30	\$818,042.70	
Aggregates,	\$2,611,751.79	\$47,697.87	\$2,564,053.92	\$3,634.1	—	\$382,307.85	\$2,172,892.16	
							\$2,555,200.00	
							\$71,437.14	
							\$14,885.35	

¹ Exclusive of Wrentham.

TABLE VII.—*Weekly Per Capita Cost of Maintenance in State Institutions for the Year ending Nov. 30, 1907.*

INSTITUTIONS.	PRIVATE.		PUBLIC.		PUBLIC AND PRIVATE.		REPAIRS AND IMPROVEMENTS.	
	RATE OF BOARD.		NET EXPENSES LESS SUPPORT RECEIPTS.		NET EXPENSES.			
	Average Number of Patients. 1907.	Five Years' Average 1902-6.	Average Number of Patients. 1907.	Three Years' Average 1904-6.	Gross Expenses. 1907.	Five Years' Average 1902-6.	1907.	Five Years' Average 1902-6.
<i>Instate hospitals:—</i>								
Worcester,	\$5.95	\$5.91	972	\$3.88	\$4.58	\$4.42	\$0.26	\$0.32
Taunton,	4.35	4.60	858	3.84	4.09	4.13	0.20	0.15
Northampton,	5.08	5.40	658	3.20	3.10	3.77	1.14	2.33
Danvers,	5.21	5.71	1,111	3.65	3.36	4.13	0.99	3.78
Westborough,	5.80	6.29	731	4.02	3.58	4.65	0.60	4.15
Totals and averages,	\$5.42	\$5.68	4,330	\$3.73	\$3.55	\$4.29	\$0.22	\$0.23
<i>Instate asylums:—</i>								
Worcester,	—	—	933	\$3.65	933	\$3.76	\$0.23	\$0.20
Medfield,	—	—	1,456	3.51	3.04	3.59	0.19	0.16
State Colony.	—	—	428	3.61	..	3.65	—	—
Totals and averages,	—	—	2,817	\$3.57	\$3.19 ¹	\$4.17	\$0.22	\$0.21
Hospitals and asylums, .	—	—	7,147	\$3.67	\$3.43	7,799	\$0.23	\$0.23
Miscellaneous:—								
State Hospital,	—	—	1,715	\$2.92	\$2.79	1,715	\$0.92	\$0.32
State Farm,	—	—	1,835	2.48	2.13	1,835	2.43	2.33
Hospital for Epileptics,	—	—	527	4.63	4.33	558	4.61	4.41
Foxborough State Hospital,	4	6.32	6.90	250	6.46	5.64	6.54	6.16
School for the Feeble-minded,	—	—	—	1,088	3.56	1,187	3.68	3.46
Totals and averages, .	—	—	5,415	\$4.22	—	5,549	\$3.24	—
Aggregates, .	\$5.26	—	12,562	\$3.78	—	13,348	\$3.69	—
	786	—					\$0.25	—
							\$0.24	—

¹ Exclusive of State Colony.

COMPARATIVE ANALYSIS OF PAY ROLL.

TABLE VIII.—Comparative Analysis of Pay Roll by Departments.

INSTITUTIONS.	MEDICAL SERVICE.				WARD SERVICE.	
	Full Quota.	AVERAGE NUMBER PERSONS, 6 Years,		AVERAGE MONTHLY COMPENSATION.	AVERAGE WEEKLY PER CAPITA COST.	Full Quota Males.
		In Service, 1907.	Average 5 Years, 1902-6.	1907.		
Insanite hospitals:—						
Worcester, · · · · ·	15	10.77	14.12	\$85.60	\$0.1879	\$0.2106
Taunton, · · · · ·	13	9.62	11.59	79.05	0.1871	0.2339
Northampton, · · · · ·	6	5.92	4.89	101.94	0.1801	0.1657
Danvers, · · · · ·	15	13.17	12.24	82.25	0.2029	0.1773
Westborough, · · · · ·	11	11.17	10.22	87.81	0.2496	0.2463
Totals and averages, · · · · ·	60	50.65	53.06	\$85.88	\$0.2015	\$0.2058
Insane asylums:—						
Worcester, · · · · ·	6	6.83	5.00	\$88.26	\$0.1491	\$0.1577
Medfield, · · · · ·	6	7.00	6.16	102.69	0.1139	0.0985
State Colony, · · · · ·	3	2.78	..	132.73	0.1990	—
Totals and averages, · · · · ·	15	16.61	11.16	\$101.79	\$0.1385	\$0.1164
Hospitals and asylums, · · · · ·	75	67.26	64.22	\$89.81	\$0.1787	\$0.1787
Miscellaneous:—						
State Hospital ¹ , · · · · ·	9	9.67	7.77	\$103.53	\$0.1347	\$0.1232
Hospital for Epileptics, · · · · ·	5	4.38	4.52	121.21	0.2196	0.2449
Foxborough State Hospital, · · · · ·	5	5.12	4.50	101.31	0.4713	0.5953
School for the Feeble-minded, · · · · ·	5	4.52	3.74	140.93	0.1238	0.1546

¹ Includes all departments.² Average for three years.

COMPARATIVE ANALYSIS OF PAY ROLL.

TABLE VIII.—Comparative Analysis of Pay Roll by Departments—Continued.

INSTITUTIONS.	WARD SERVICE—Con.					
	AVERAGE NUMBER OF PERSONS, FEMALES.		AVERAGE NUMBER OF PERSONS, TOTALS.		NUMBER OF PATIENTS TO ONE NURSE.	
	Full Quota Females.	In Service, 1907.	In Service, 1907.	Average 5 Years, 1902-6.	MALES.	FEMALES.
Insane hospitals:—						
Worcester, · · · · ·	80	63.33	70.38	160	114.66	126.66
· · · · ·	61	58.24	56.18	107.22	10.13	10.04
Taunton, · · · · ·	40	33.33	31.61	76	68.25	69.52
Northampton, · · · · ·	75	69.06	61.38	135	125.87	116.12
Danvers, · · · · ·	70	71.96	60.04	114	115.71	101.02
Totals and averages, · · · · ·	326	300.92	279.59	546	531.71	508.94
Insane asylums:—						
Worcester, · · · · ·	40	36.42	27.68	81	73.12	53.05
Medfield, · · · · ·	103	92.26	74.97	174	139.78	116.50
State Colony, · · · · ·	15	10.31	—	43	35.47	—
Totals and averages, · · · · ·	158	138.93	102.63	298	218.37	169.55
Hospitals and asylums, · · · · ·	484	439.91	382.24	894	780.08	678.49
Miscellaneous:—						
State Hospital, ¹ · · · · ·	77	57.49	51.81	105	82.58	70.67
Hospital for Epileptics, · · · · ·	31	31.88	23.99	66	68.93	48.88
Foxborough State Hospital, · · · · ·	—	—	—	24	21.80	16.00
School for the Feeble-minded, · · · · ·	117	113.97	73.17 ²	140	137.00	98.24

¹ Includes all departments.² Average for three years.

COMPARATIVE ANALYSIS OF PAY ROLL.

TABLE VIII. — Comparative Analysis of Pay Roll, by Departments — Continued.

INSTITUTIONS.	WARD SERVICE — Con.						GENERAL ADMINISTRATION.	
	AVERAGE MONTHLY COMPENSATION.			AVERAGE WEEKLY PER CAPITA COST.				
	MALES.	FEMALES.	TOTALS.	1907.	Average 5 Years, 1902-6.	1907.		
1907.	Average 5 Years, 1902-6.	1907.	Average 5 Years, 1902-6.	1907.	Average 5 Years, 1902-6.	1907.	Full Quota.	
Inane hospitals:—							In Service, 1907.	
Worcester,	\$25.97	\$25.58	\$19.29	\$18.21	\$22.38	\$21.50	Average Number Persons, 1902-6.	
Tanion,	26.89	26.92	21.60	24.19	23.65	\$0.5208	76	
Northampton,	28.47	26.23	21.48	19.17	24.55	\$0.6377	68.29	
Danvers,	27.12	26.26	21.77	19.19	24.18	\$0.6164	56.51	
Westborough,	26.70	24.34	19.05	17.87	21.95	0.6382	76.73	
Totals and averages,	\$26.91	\$25.80	\$20.59	\$18.98	\$23.33	\$22.09	61.06	
Insane asylums:—								
Worcester,	\$25.81	\$24.40	\$19.63	\$16.92	\$22.73	\$20.48	52.58	
Medfield,	27.88	27.25	21.85	19.97	23.90	\$0.4111	41.60	
State Colony,	25.63	—	20.24	—	22.64	\$0.3922	81.74	
Totals and averages,	\$26.64	\$26.18	\$21.15	\$19.15	\$23.57	\$21.96	51.98	
Hospitals and asylums,	\$26.83	\$25.96	\$20.77	\$19.04	\$23.41	\$22.08	—	
Miscellaneous:—								
State Hospital,	\$23.60	\$24.55	\$20.20	\$19.58	\$21.23	\$20.88	193.63	
Hospital for Epileptics,	28.63	25.23	20.22	18.76	24.74	\$0.5617	123.34	
Foxborough State Hospital,	29.75	29.68	—	—	29.75	0.5882	391.31	
School for the Feeble-minded,	29.20	26.51	24.05	19.98	24.91	0.6636	48.33	
						0.5524	44.50	

TABLE VIII.—Comparative Analysis of Pay Roll, by Departments—Continued.

GENERAL ADMINISTRATION—Con.		REPAIRS AND IMPROVEMENTS.				
INSTITUTIONS.	AVERAGE MONTHLY COMPENSATION.	AVERAGE WEEKLY PER CAPITA COST.		AVERAGE MONTHLY COMPENSATION.		
	1907.	Average 5 Years, 1902-6.	1907.	Average 5 Years, 1902-6.	In Service, 1907.	Average 5 Years, 1902-6.
<i>Insane hospitals:</i> —						
Worcester,	.	\$30.09	\$0.4189	\$0.3122	16	10.68
Taunton,	.	25.95	0.5388	0.3917	9	3.89
Northampton,	.	33.36	0.4048	0.3508	9	8.49
Danvers,	.	37.65	0.4307	0.3188	20	14.61
Westborough,	.	32.84	27.97	0.6333	7	4.79
<i>Totals and averages,</i>	.	\$32.21	\$28.44	\$0.4812	\$0.3622	61
<i>Insane asylums:</i> —	.					
Worcester,	.	\$28.74	\$24.66	\$0.4302	\$0.3903	17
Medfield,	.	28.95	29.14	0.4870	0.3923	17
State Colony,	.	30.67	—	0.4461	—	4
<i>Totals and averages,</i>	.	\$29.13	\$27.64	\$0.4620	\$0.3718	38
<i>Hospitals and asylums,</i>	.	\$31.05	\$28.17	\$0.4743	\$0.3650	99
<i>Miscellaneous:</i> —	.					
State Hospital,	.	\$34.01	\$35.00	\$0.2650	\$0.2197	6
Hospital for Epileptics,	.	27.32	27.26	0.4469	0.3357	5
Foxborough State Hospital,	.	33.86	30.28	0.6784	0.6419	3
School for the Feeble-minded,	.	32.60	31.49	0.3063	0.3790	9

COMPARATIVE ANALYSIS OF PAY ROLL.

TABLE VIII.—Comparative Analysis of Pay Roll, by Departments—Continued.

INSTITUTIONS.	FARM, STABLE AND GROUNDS.				ALL PERSONS EMPLOYED.	
	Full Quota.	AVERAGE NUMBER PERSONS.		AVERAGE MONTHLY COMPENSATION.	Full Quota.	AVERAGE NUMBER PERSONS.
		In Service, 1907.	Average 5 Years, 1902-6.	Average 5 Years, 1907.	Average 5 Years, 1902-6.	In Service, 1907.
Insane hospitals:—						
Worcester,	:	:	:	30.64	\$0.2494	246.58
Taunton,	:	19.30	21.65	30.35	\$0.1671	238.51
Northampton,	:	20.46	16.91	36.10	0.1606	212.72
Danvers,	:	27.03	23.22	30.50	0.2418	143.76
Westborough,	:	27.78	23.64	40.47	0.2049	121.10
Totals and averages,	146	134.68	115.96	35.13	0.2192	232.94
331.60	\$0.1750	1,301	1080.06	984.58		
Insane asylums:—						
Worcester,	:	:	:	8.32	\$0.2457	179.03
Medfield,	:	35.29	22.29	28.77	0.1600	302.81
State Colony,	:	5.64	—	42.47	0.1291	72.21
Totals and averages,	75	72.76	30.61	30.90	\$0.1841	554.05
Hospitals and asylums,	221	207.44	146.57	33.64	\$0.2065	358.35
Miscellaneous:—						
State Hospital,	:	:	:	15.14	\$0.0826	1634.11
Hospital for Epileptics,	:	25.34	15.04	27.17	\$0.0705	1342.93
Foxborough State Hospital,	:	20.01	15.04	31.53	0.2609	135.40
School for the Feeble-minded,	:	7.73	5.02	31.04	0.2150	146.31
	26.35	13.25	34.05	33.73	0.1744	56.70
	27				0.1187	225.95
						164.65

TABLE VIII.—*Comparative Analysis of Pay Roll, by Departments—Concluded.*

COMPARATIVE ANALYSIS OF PAY ROLL.

		ALL PERSONS EMPLOYED — Con.		EXTRA SERVICE.	
		NUMBER OF PERSONS TO ONE EMPLOYEE.		COST OF LABOR NOT ON PAY ROLL.	
INSTITUTIONS.		1907.	Average 5 Years, 1902-6.	1907.	Average 5 Years, 1902-6.
Insane hospitals:—					
Worcester,	.	4.59	4.91	\$31.67	\$1,591.9
Taunton,	.	4.41	4.63	29.30	1,533.7
Northampton,	.	5.38	5.93	34.45	1,478.6
Danvers,	.	5.10	5.46	35.37	1,601.7
Westborough,	.	3.85	4.09	31.24	1,863.9
Totals and averages,	.	4.61	4.94	\$32.31	\$1,616.4
Insane asylums:—					
Worcester,	.	5.21	5.41	\$31.19	\$1,381.2
Medfield,	.	4.81	6.23	30.19	1,448.9
State Colony,	.	5.33	—	33.04	1,286.3
Totals and averages,	.	5.08	5.96	\$30.89	\$1,401.8
Hospitals and asylums,	.	4.77	5.21	\$31.83	\$1,538.9
Miscellaneous:—					
State Hospital,	.	9.56	10.34	\$31.58	\$0,762.4
Hospital for Epileptics,	.	3.84	3.99	30.59	1,838.1
Foxborough State Hospital,	.	4.48	5.24	37.99	1,956.9
School for the Feeble-minded,	.	5.25	5.30	32.27	1,417.4

GENERAL STATISTICS.

CLASSES OF PERSONS UNDER SUPERVISION.

TABLE IX.—*Classes of Persons under Supervision, their Number and Location, Oct. 1, 1907, and their Increase for the Year.*

	NUMBER.	INCREASE FOR THE YEAR.	NON-RESIDENT.	EPILEPTIC.	CRIMINAL.	OTHER CLASSES.		TOTAL INMATES.	
						MENTAL.	NON-MENTAL.	INMATES.	
								Males.	Females.
A.—Inmate:									
Public institutions:—									
Worcester Hospital,	584	569	1,163	11	56	67	—	29	17
Taunton Hospital,	490	429	81	22	23	31	34	3	6
Northampton Hospital,	361	384	725	32	13	45	9	23	4
Danvers Hospital,	543	708	1,251	10	19	29	17	9	26
Westborough Hospital,	349	620	869	3	40	5	35	4	8
Boston Insane Hospital,	323	427	769	20	32	20	11	14	25
Insane wards, State Hospital,	186	426	612	4	44	48	—	18	36
Worcester Asylum,	463	506	975	107	28	135	—	42	40
Medfield Asylum,	538	911	1,449	4	41	37	—	30	33
State Colony,	311	151	462	33	26	50	—	2	29
Hospital for Epileptics,	166	135	291	9	16	24	—	156	135
Asylum for Insane Criminals,	567	567	43	—	43	—	—	22	538
Foxborough Hospital,	178	—	178	66	—	—	—	—	—
Total,	5,065	5,137	10,202	239	137	376	5	4	9
Family care,	13	282	275	—	101	101	—	—	—
Total public,	5,078	5,399	10,477	239	127	396	5	4	9
Private institutions:—									
McLean Hospital,	97	108	205	8	14	22	23	18	41
Smaller institutions,	18	68	86	6	3	9	1	11	12
Total private,	115	176	291	14	17	31	24	29	53
Total public and private,	5,193	5,551	10,768	253	144	397	29	33	62

¹ Decrease.² Includes 7 placed in family care by trustees.³ Includes 1 placed in family care by trustees.

CLASSES OF PERSONS UNDER SUPERVISION.

TABLE IX. — Classes of Persons under Supervision, etc. — Concluded.

	NUMBER.	INCREASE FOR THE YEAR.		NON-RESIDENT.		EPILEPTICS.		SCHOOL.		CUSTODIAL.		OTHER CLASSES.		TOTAL INMATES.		
		Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.	Males.	Females.	Totals.
B.—Feeble-minded:—																
School for the Feeble-minded,	703	515	1,218	35	63	98	26	24	50	43	26	69	341	309	650	-
Wrentham State School, . . .	10	—	10	—	—	—	—	—	—	—	—	—	—	—	—	—
Hospital Cottages, . . .	8	9	17	—	—	—	—	—	—	—	—	—	—	—	—	—
Dr. Brown's Institution, . . .	47	13	60	1	34	7	41	5	2	7	18	8	20	5	34	—
Ahmhousees, ² . . .	95	91	186	21	31	51	—	—	—	—	—	—	—	—	—	—
Total feeble-minded, . . .	863	628	1,491	44	60	104	60	31	91	48	28	76	335	219	604	383
C.—Inebriates:—																
Foxborough Hospital, . . .	90	—	90	90	191	—	191	—	—	—	—	—	—	—	—	—
Insane hospitals, . . .	—	2	—	15	15	2	21	7	7	—	—	—	—	—	—	—
Private institutions, . . .	—	—	—	—	—	—	—	31	31	—	—	—	—	—	—	—
Total inebriates, . . .	92	15	107	—	211	81	294	—	—	—	—	—	—	—	—	—
D.—Epileptics:—																
Hospital for Epileptics, . . .	302	268	570	19	20	39	—	—	—	—	—	—	—	—	—	—
Insane hospitals, . . .	109	68	177	61	6	—	—	—	—	—	—	—	—	—	—	—
Insane asylums, . . .	114	91	205	—	1	—	—	—	—	—	—	—	—	—	—	—
School for the Feeble-minded, . . .	43	26	69	—	4	—	—	—	—	—	—	—	—	—	—	—
Hospital Cottages, . . .	55	33	88	61	1	71	—	—	—	—	—	—	—	—	—	—
Family care, . . .	—	1	1	1	1	1	—	—	—	—	—	—	—	—	—	—
Private Institutions, . . .	7	7	14	—	1	2	—	—	—	—	—	—	—	—	—	—
Total epileptics, . . .	630	494	1,124	8	30	38	—	—	—	—	—	—	—	—	—	—
Whole number of persons under supervision, . . .	6,378	6,470	12,848	257	203	460	—	—	—	—	—	—	—	—	—	—
Viz.: Insane, feeble-minded, epileptic and inebriate, . . .	6,350	6,385	12,735	277	201	478	—	—	—	—	—	—	—	—	—	—
Voluntary mental patients (sane), . . .	6	21	27	71	31	101	—	—	—	—	—	—	—	—	—	—
Other classes, . . .	22	64	86	13	5	81	—	—	—	—	—	—	—	—	—	—

² Figures taken from reports of Overseers of Poor, March 1, 1907.¹ Decrease.

TABLE X.—Admissions, Discharges, etc., of the Insane in Institutions and boarded in Private Families for the Year ending Sept. 30, 1907.

ADMISSIONS, DISCHARGES, ETC.									
	Worcester Hospital.	Taunton Hospital.	Northampton Hospital.	Westborough Hospital.	Danvers Hospital.	Boston Hospital.	Inensive Wards.	Medfield Asylum.	State Colony.
Remaining Sept. 30, 1906.	.	.	.	.	.	.	.	.	.
Men,	1,086	940	770	1,222	904	708	564	1,486	403
Women,	673	498	313	533	389	301	182	534	278
Admitted within the year,	.	.	.	.	.	.	.	.	125
Men,	622	567	336	762	561	445	200	212	54
Women,	355	315	174	418	240	185	148	27	120
By commitment,	267	252	162	344	321	260	143	64	85
Men,	517	441	293	586	404	353	94	27	35
Women,	293	164	154	323	182	152	61	-	-
By transfer,	224	196	139	263	222	201	48	209	110
From visit,	22	26	6	25	30	6	99	53	-
From escape,	9	8	3	17	18	11	-	-	-
Nominally for discharge,	2	1	1	10	2	5	2	2	2
Whole number of cases within the year,	.	.	.	.	.	.	5	1	8
Dismissed within the year,	.	.	.	.	.	.	.	.	.
Men,	555	597	381	733	596	393	152	77	61
Women,	344	323	206	408	280	153	53	41	23
Viz.: Discharged,	.	.	.	.	.	.	240	99	9
Men,	.	.	.	.	.	.	145	22	14
Women,	.	.	.	.	.	.	68	7	13
Recovered,	.	.	.	.	.	.	87	15	1
Men,	.	.	.	.	.	.	123	5	-
Women,	.	.	.	.	.	.	69	90	-
Capable of self support,	.	.	.	.	.	.	38	44	6
Improved,	.	.	.	.	.	.	31	46	3
Not improved,	.	.	.	.	.	.	71	37	5
Not insane,	.	.	.	.	.	.	72	54	4
							66	42	5
							26	2	-
							38	4	-

ADMISSIONS, DISCHARGES, ETC.

Died,	162	122	85	181	113	132	61	82
Men,	105	59	51	80	53	62	30	20
Women,	57	63	34	92	60	69	31	62
Transferred,	74	180	111	143	112	28	10	5
On visit Sept. 30, 1907,	93	93	36	123	134	88	8	4
On escape Sept. 30, 1907,	18	3	8	8	10	10	7	3
Remaining Sept. 30, 1907,	1,163	910	725	1,251	869	760	612	975
Men,	584	490	361	643	349	333	186	469
Women,	669	420	364	708	520	427	426	538
Supported by the State,	910	766	544	1,007	636	643	608	947
Reimbursing,	85	65	67	125	78	18	4	4,449
Private,	158	79	114	119	165	99	28	311
Daily average number,	1,112.51	940.30	776.44	1,224.506	882.43	723.53	625.12	911.36
State,	869.61	797.69	601.82	989.189	664.56	611.38	620.03	885.26
Reimbursing,	84.56	63.61	62.57	106.26	59.17	17.49	3.09	1,420.009
Private,	158.34	79.70	112.05	120.057	158.71	94.75	-	41.03
Persons first admitted to any insane hospital,	411	359	242	470	305	284	82	-
Men,	242	203	125	263	143	133	44	-
Women,	169	166	117	207	162	151	38	-
Recent (insane less than one year),	236	163	125	251	166	163	29	-
Chronic (insane one year or more),	148	102	115	192	101	90	27	-
Unknown,	27	94	2	27	48	31	26	-
Persons admitted by commitment,	513	437	293	582	401	352	94	-
Viz.: From cities and large towns,	399	302	203	484	290	341	81	-
From country districts,	114	135	90	98	111	11	13	-
Whole number of persons within the year,	1,620	1,388	1,071	1,841	1,352	1,076	759	1,051
Whole number of persons admitted within the year,	548	471	303	632	450	374	195	211
Whole number of persons dismissed within the year,	482	501	347	607	486	322	147	69

TABLE X.—Admissions, Discharges, etc., of the Insane in Institutions and boarded in Private Families for the Year ending Sept. 30, 1907—Concluded.

ADMISSIONS, DISCHARGES, ETC.									
	Hospital for Epileptics.	Hospital for Insane	Asylum for Insane	Total Public	FAMILY CARE.	Total Public	McLean Hospital.	Smaller Institutions.	Total Private
Remaining Sept. 30, 1906,					9,826	285	10,111	183	10,371
Men, .	267	524	112	4,826	13	4,839	89	12	4,940
Women, .	147	524	112	5,000	272	5,272	94	65	5,431
Admitted within the year,									
Men, .	57	118	107	4,161	78	4,239	186	68	4,493
Women, .	31	118	107	2,260	5	2,265	84	23	2,372
By commitment,	26	—	—	1,901	73	1,974	102	147	2,121
Men, .	50	97	—	2,835	—	2,835	167	62	3,064
Women, .	26	97	—	1,523	—	1,523	76	20	1,619
By transfer,	24	10	107	1,312	—	1,312	91	42	1,445
From visit,	2	—	1	705	67	772	6	3	781
From escape,	—	—	—	67	1	68	1	2	71
Nominally for discharge,	5	10	—	27	—	27	—	—	27
Whole number of cases within the year,	324	612	219	13,987	363	14,550	369	145	14,864
Dismissed within the year,									
Men, .	33	75	41	3,785	88	3,873	164	59	223
Women, .	22	75	41	2,021	5	2,026	76	17	2,119
Viz.: Discharged,	11	—	—	1,764	83	1,847	88	42	130
Men, .	11	43	2	1,296	16	1,312	123	38	1,473
Women, .	—	43	2	—	—	—	65	—	753
Recovered,	2	—	—	686	2	686	68	28	720
Men, .	—	—	—	610	14	624	42	12	405
Women, .	—	—	—	349	2	351	168	1	187
Capable of self support,	—	—	—	167	1	182	183	1	218
Improved, .	—	—	—	182	1	255	268	21	289
Not insane, .	—	—	—	11	2	494	405	35	457
	11	4	2	—	—	—	—	17	33
	15	—	—	—	—	279	—	8	312
	3	—	—	—	—	9	—	1	10

ADMISSIONS, DISCHARGES, ETC.

Died,	Men,	21	25	1,118	6	1,124	20	32	1,156
	Women,	21	25	573	1	574	9	13	587
Transferred,		-	-	545	5	560	11	8	569
On visit Sept. 30, 1907;		1	1	707	54	761	10	8	779
On escape Sept. 30, 1907;		9	1	602	12	614	10	7	624
Remaining Sept. 30, 1907,	Men,	-	-	-	-	62	1	2	64
Women,		567	178	10,202	275	10,477	205	291	10,768
Supported by the State,		136	178	6,065	13	5,978	97	18	5,193
Reimbursing,		135	-	5,137	262	5,399	108	68	5,575
Private,		-	-	-	-	-	-	-	-
Daily average number,	State,	277	567	177	8,943	234	9,177	-	9,177
Reimbursing,		8	-	1	529	7	536	-	536
Private,		6	-	-	730	341	764	205	1,055
		275.06	547.70	151.35	10,045,382	269.32	10,214,712	192.36	10,589,832
		260.64	546.70	151.24	8,838,935	230.03	9,068,965	-	9,068,965
		7.71	1.00	.11	470.14	6.19	482.33	-	482.33
		6.71	-	-	730.317	33.10	763.417	192.36	82.76
Persons first admitted to any Insane hospital,	Men,	45	88	-	2,926	-	2,286	128	49
Women,		23	88	-	1,204	-	1,264	55	15
Recent (Insane less than one year)		22	-	-	1,022	-	1,022	73	34
Chronic (Insane one year or more)		45	50	-	1,318	-	1,218	63	38
Unknown,		-	35	-	810	-	810	45	10
Persons admitted by commitment,		-	3	-	238	-	268	-	1
Viz.: From cities and large towns,		-	-	-	-	-	-	-	1
From country districts,		-	-	-	-	-	-	-	259
Whole number of persons within the year,		319	632	218	12,758	341	12,990	353	142
Whole number of persons admitted within the year,		52	108	106	2,901	68	2,902	173	66
Whole number of persons dismissed within the year,		28	65	41	2,322	77	2,557	149	57

¹ Includes 15 self-supporting and 6 living with friends without public aid.

TABLE XI.—*Forms of Mental Disease in Patients committed, discharged or who died, at Public Institutions for the Insane and McLean Hospital.*

	COMMITMENTS.	DISCHARGES—RECOVERIES AND CAPABLE OF SELF-SUPPORT.					
		WORCESTER HOSPITAL.	TAUNTON HOSPITAL.	NORTHAMPTON HOSPITAL.	DANVERS HOSPITAL.	CAPABLE OF SELF-SUPPORT.	RECOVERED.
First admitted to any hospital:—							
A.—Most curable:—							
Acute hallucinosis,	1	42	41	26	2	16	10
Manic-depressive insanity,	1	—	—	—	1	3	14
Insanity of pregnancy,	—	—	—	—	—	—	8
Confessional insanity,	—	—	—	—	—	—	—
Hysterical insanity,	—	—	—	—	—	—	—
Fixed ideas,	—	—	—	—	—	—	—
Neurasthenia,	—	—	—	—	—	—	—
Alcoholic insanity, acute,	—	—	—	—	—	—	—
Toxic insanity, acute,	—	—	—	—	—	—	—
Delirium, acute,	—	—	—	—	—	—	—
Delirium with somatic disease,	—	—	—	—	—	—	—
Psychosis with somatic disease,	—	—	—	—	—	—	—
Compulsive insanity,	—	—	—	—	—	—	—
Total A,	—	—	—	—	—	—	—
B.—Less curable:—							
Mania, chronic,	—	—	—	—	—	—	—
Melancholia, chronic,	—	—	—	—	—	—	—
Involution psychoses,	—	—	—	—	—	—	—
Choreic insanity,	—	—	—	—	—	—	—
Psychopathic infidelity,	—	—	—	—	—	—	—
Traumatic insanity,	—	—	—	—	—	—	—
Myxedematous insanity,	—	—	—	—	—	—	—
Total B,	—	—	—	—	—	—	—
Total A, B,	95	64	117	71	49	56	27
Total C,	—	—	—	—	—	42	3
Total D,	—	—	—	—	—	14	30
Total E,	—	—	—	—	—	4	48
Total F,	—	—	—	—	—	—	23

FORMS OF MENTAL DISEASE, ETC.

Alcoholic insanity, chronic,	17	23	12	33	10	11	2	26	134	-	3	-	10	
Toxic insanity, chronic,	-	-	5	5	-	1	-	11	-	-	1	2	-	
Korsakow's psychosis,	-	-	5	99	64	65	4	40	524	1	6	11	-	
Dementia praecox,	-	92	47	-	-	-	-	-	-	-	-	-	-	
Dementia secondary,	-	-	-	-	5	5	-	-	-	-	2	-	-	
Paranoia,	-	-	3	4	-	16	2	1	4	30	-	-	-	
Paranoid condition,	-	-	26	7	-	12	-	9	-	54	-	-	-	
Delusional insanity,	-	-	-	-	-	-	-	1	-	4	-	-	-	
Moral insanity,	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total B,	-	179	154	73	161	120	100	25	74	886	4	30	18	
Total A, B,	-	-	275	239	137	278	191	149	81	101	1,451	46	33	26
C.—Most incurable:—														
General paralysis,	-	-	47	21	14	48	22	50	9	12	223	-	2	-
Coarse brain lesions,	-	-	16	8	15	39	14	11	8	8	122	-	-	-
Epileptic insanity,	-	-	9	11	7	15	6	7	2	51	108	-	1	2
Inanity,	-	-	9	11	21	17	9	4	13	87	-	2	-	2
Semile insanity,	-	-	53	49	45	67	54	52	8	29	347	-	-	-
Total C,	-	134	100	106	176	105	127	27	113	887	-	5	-	2
Total A, B, C,	-	-	409	339	242	454	296	276	108	214	2,338	46	38	27
D.—Undiagnosed,	-	-	7	18	-	16	9	8	20	71	-	-	-	-
Not insane,	-	-	2	2	-	-	-	-	1	5	-	-	-	-
Total D,	-	-	2	20	-	16	9	8	20	1	76	-	-	-
Total first admissions,	-	-	411	359	242	470	305	284	128	215	2,414	46	38	30
Other admissions:—														
A.—Most curable:—														
Mania, acute,	-	-	37	22	11	42	32	23	4	193	22	6	10	7
Manic-depressive insanity,	-	-	-	-	-	-	3	-	-	-	-	3	2	-
Confusional insanity,	-	-	-	-	-	1	1	-	-	3	-	-	-	-
Hysterical insanity,	-	-	-	-	1	12	5	1	1	2	-	-	1	5
Neurastenia,	-	-	9	4	2	12	1	1	1	33	2	1	1	2
Alcoholic insanity, acute,	-	-	1	-	-	1	-	-	1	4	-	1	-	-
Toxic insanity, acute,	-	-	-	-	-	-	-	-	1	2	-	-	-	-
Delirium, acute,	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Delirium with somatic disease,	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total A,	-	-	47	26	14	56	42	24	25	5	239	24	6	13
												5	2	20
												9		9

TABLE XI.—*Forms of Mental Disease in Patients committed, discharged or who died, at Public Institutions for the Insane and McLean Hospital* — Continued.

FORMS OF MENTAL DISEASE, ETC.

FORMS OF MENTAL DISEASE, ETC.

TABLE XI.—*Forms of Mental Disease in Patients committed, discharged or who died, at Public Institutions for the Insane and McLean Hospital—Continued.*

	COMMITMENTS.	DISCHARGES—RECOVERIES AND CAPABLE OF SELF-SUPPORT.					
		WORCESTER HOSPITAL.	TAUNTON HOSPITAL.	NORTHAMPTON HOSPITAL.	YANVERS HOSPITAL.	CAPABLE OF SELF-SUPPORT.	RECOVERED.
B.—Less curable:—							
Mania, chronic,	•	•	•	•	•	•	•
Melancholia, chronic,	•	•	•	•	•	•	•
Involution psychosis,	•	•	•	•	•	•	•
Choreic insanity,	•	•	•	•	•	•	•
Psychopathic inferiority,	•	•	•	•	•	•	•
Tranquillized insanity,	•	•	•	•	•	•	•
Myxedematosus insanity,	•	•	•	•	•	•	•
Alcoholic insanity, chronic,	•	•	•	•	•	•	•
Toxic insanity, chronic,	•	•	•	•	•	•	•
Dementia, praecox,	•	•	•	•	•	•	•
Dementia, secondary,	•	•	•	•	•	•	•
Paranoia,	•	•	•	•	•	•	•
Paranoid condition,	•	•	•	•	•	•	•
Delusional insanity,	•	•	•	•	•	•	•
Total B,	•	•	•	•	•	•	•
Total A, B,	•	•	•	•	•	•	•
C.—Most incurable:—							
General paralysis,	•	•	•	•	•	•	•
Coarse brain lesions,	•	•	•	•	•	•	•
Epileptic insanity,	•	•	•	•	•	•	•

FORMS OF MENTAL DISEASE, ETC.

TABLE XI.—*Forms of Mental Disease in Patients committed, discharged or who died, at Public Institutions for the Insane and McLean Hospital* — Concluded.

FORMS OF MENTAL DISEASE, ETC.

PROBABLE CAUSES OF MENTAL DISEASE, ETC.

FIRST ADMITTED.	PREDISPOSING CAUSES.		ALCOHOLIC INTEMPERANCE.		Totals.	
	HEREDITARY TENDENCY.		NEUROTIC TENDENCY.			
	Men.	Women.	Men.	Women.		
A — Physical:—						
Alcoholic Intemperance, .	308	94	402	32	328	
Arterio-sclerosis, .	42	20	62	2	2	
Brain tumor, .	3	1	4	—	—	
Cerebral hemorrhage, .	23	28	51	1	4	
Cerebro-spinal meningitis, .	1	1	1	—	—	
Childbearing, .	—	—	36	—	—	
Chorea, .	1	1	2	—	—	
Coarse brain lesions, .	9	10	2	—	—	
Congenital, .	79	53	132	6	9	
Consanguinity, .	1	—	1	—	—	
Deafness, .	—	1	1	—	—	
Dentition, .	—	1	1	—	—	
Dissipation, .	4	—	2	—	—	
Drug habit, .	8	8	16	—	—	
Endocarditis, .	—	1	1	—	—	
Epilepsy, .	23	21	44	3	3	
Heredity, .	56	71	127	36	127	
Infectious disease and intemperance, .	—	1	—	—	—	
La grippe, .	—	1	1	—	—	
La grippe and bronch pneumonia, .	—	1	1	—	—	
Masturbation, .	—	1	—	—	—	
Menopause, .	—	—	48	48	6	
Menstrual disorders, .	—	—	1	1	—	
Necrosis of skull, .	—	—	1	2	3	
Nephritis, .	—	1	1	—	—	
Polioencephalitis, .	—	—	31	43	4	
Privation and other causes, .	12	—	31	—	11	
Puerperal, .	—	—	—	—	—	

PROBABLE CAUSES OF MENTAL DISEASE, ETC.

TABLE XIII.—*Duration of Mental Disease and its Treatment in Persons who recovered or died at Public Institutions for the Insane and McLean Hospital.*

PERIOD.	FIRST ADMITTED TO ANY HOSPITAL.										ALL OTHER ADMISSIONS.									
	DURATION BEFORE ADMISSION.					HOSPITAL RESIDENCE.					WHOLE DURATION.					WHOLE KNOWN PERIOD OF MENTAL DISEASE.				
	Men.	Women.	Total.	Men.	Women.	Total.	Men.	Women.	Total.	Men.	Men.	Women.	Total.	Men.	Women.	Total.	Men.	Women.	Total.	
A.—Recovered:—																				
Under 1 month,	.	.	.	75	56	131	23	10	33	9	3	12	1	-	1	-	-	-	-	-
From 1 to 3 months,	.	.	.	33	66	99	36	91	46	26	72	2	2	4	4	4	3	3	7	7
3 to 6 months,	.	.	.	14	11	25	34	39	73	35	27	62	5	4	9	7	11	11	18	18
6 to 12 months,	.	.	.	7	11	18	22	23	45	27	34	61	7	18	25	13	22	22	35	35
1 to 2 years,	.	.	.	4	3	7	5	11	16	11	17	23	11	20	31	10	20	20	30	30
2 to 5 years,	.	.	.	2	7	9	3	5	8	6	11	17	8	22	30	6	22	22	28	28
5 to 10 years,	.	.	.	-	2	2	1	2	3	1	5	6	4	6	10	2	1	1	3	3
10 to 20 years,	.	.	.	-	-	-	-	-	-	-	-	-	-	3	3	-	1	1	1	1
Over 20 years,	.	.	.	-	-	-	-	-	-	-	-	-	2	1	3	-	-	-	-	-
Totals,	.	.	.	135	123	258	143	126	269	135	123	258	40	76	116	42	80	122	122	122
Unknown,	.	.	.	8	3	11	-	-	-	8	3	11	2	4	6	-	-	-	-	-
Totals,	.	.	.	143	126	269	143	126	269	143	126	269	42	80	122	42	80	122	122	122
Average of known cases (in months),	.	.	.	5.00	5.31	5.15	4.57	8.38	6.35	6.65	14.80	10.54	38.47	34.85	36.10	17.36	19.09	18.49	18.49	18.49

DURATION OF MENTAL DISEASE, ETC.

TABLE XIII.—Duration of Mental Disease and its Treatment in Persons who recovered or died at Public Institutions for the Insane and McLean Hospital—Concluded.

PERIOD.	FIRST ADMITTED TO ANY HOSPITAL.						ALL OTHER ADMISSIONS.					
	DURATION BEFORE ADMISSION.			HOSPITAL RESIDENCE.			WHOLE DURATION.			WHOLE KNOWN PERIOD OF MENTAL DISEASE.		
	Men.	Women.	Totals.	Men.	Women.	Totals.	Men.	Women.	Totals.	Men.	Women.	Totals.
B.—Died:—												
Congenital, .	6	5	11	1	-	1	4	2	6	2	-	-
Under 1 month, .	53	44	97	98	50	148	13	11	24	1	2	1
From 1 to 3 months, .	50	40	90	65	43	108	28	20	48	-	-	3
3 to 6 months, .	41	32	73	52	40	92	17	17	34	4	4	5
6 to 12 months, .	51	27	78	46	44	90	35	21	56	3	3	6
1 to 2 years, .	82	61	143	62	44	106	83	42	125	6	7	12
2 to 5 years, .	77	77	154	76	82	158	130	91	221	19	19	38
5 to 10 years, .	39	36	75	37	50	87	62	68	130	15	29	44
10 to 20 years, .	9	18	27	19	35	54	24	50	74	20	34	54
Over 20 years, .	12	11	23	14	8	22	24	29	53	24	37	61
Totals, .	420	351	771	470	396	866	420	361	771	94	131	225
Unknown, .	50	45	95	-	-	-	50	45	95	18	29	47
Totals, .	470	396	866	470	396	866	470	396	866	112	160	272
Average of known cases (in months), .	28.76	40.57	34.14	34.33	46.74	39.99	62.60	80.28	69.06	167.87	183.48	176.96
										113.72	115.76	114.91

NATIVITY AND PARENTAGE OF INSANE PERSONS, ETC.

TABLE XIV.—*Nativity and Percentage of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital.*

PLACES OF NATIVITY.	1907.			FOUR YEARS, 1904-1907.		
	MEN.	WOMEN.	TOTALS.	PATIENTS.	FATHERS.	MOTHERS.
Massachusetts,	501	227	399	170	171	404
Other New England States,	142	141	122	121	264	257
Other States.	93	59	69	51	144	953
Total native,	736	427	433	572	329	343
Other countries:						
Africa.	3	4	3	1	3	4
Armenia.	5	5	5	3	1	8
Asia.	-	-	-	1	1	1
At sea.	-	-	-	1	1	-
Austria.	15	15	14	4	4	19
Australia.	-	-	1	1	1	1
Azores.	6	4	4	2	2	6
Barbados Islands.	-	1	1	1	1	1
Belgium.	-	-	-	1	1	1
Bohemia.	-	-	-	2	2	2
Bulgaria.	-	-	-	1	1	1
Canada.	137	141	146	127	130	124
Cape Verde Islands.	3	2	3	-	3	2
China.	1	1	1	-	1	1
Denmark.	55	68	66	48	60	61
England.	-	8	8	6	6	6
Finland.	-	2	3	1	4	14
France.	19	35	33	18	4	3
Germany.	-	9	9	-	31	37
Greece.	-	1	1	-	1	1
Holland.	-	2	2	-	1	1
India.	-	-	-	-	1	1

NATIVITY AND PARENTAGE OF INSANE PERSONS, ETC.

CIVIL CONDITION OF INSANE PERSONS, ETC.

TABLE XV.—*Civil Condition of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital.*

CIVIL CONDITION.	1907.			FOUR YEARS, 1904-1907.		
	Men.	Women.	Totals.	Men.	Women.	Totals.
Unmarried,	611	417	1,028	2,256	2,609	3,865
Married,	524	444	968	2,046	1,624	3,670
Widowed,	148	210	358	506	851	1,357
Divorced,	7	17	24	48	55	103
Unknown,	29	7	36	88	42	130
Totals,	1,319	1,095	2,414	4,944	5,181	9,125

TABLE XVI.—*Occupations of Insane Persons admitted to Public Institutions for the Insane and McLean Hospital, who were received for the First Time at Any Hospital.*

OCCUPATIONS.	1907.			FOUR YEARS, 1904-1907.		
	Men.	Women.	Totals.	Men.	Women.	Totals.
Educated or professional, .	49	44	93	189	145	334
Domestic,	18	195	213	73	750	823
Farmers,	50		50	226	-	226
Housekeepers,		511	511		1,589	1,589
Laborers,	284		284	1,091	-	1,091
Mechanical,	278	2	280	1,014	18	1,032
Operatives,	95	89	184	438	309	747
Traders,	135	8	143	641	130	771
Miscellaneous,	235	57	292	613	118	731
Totals,	1,144	906	2,050	4,285	3,059	7,344
No occupation,	160	183	343	573	1,038	1,611
Unknown,	15	6	21	86	84	170
Totals,	1,319	1,095	2,414	4,944	4,181	9,125

MEMBERS OF THE STATE BOARD OF INSANITY.

MEMBERS OF THE STATE BOARD OF INSANITY.

Original Appointment.	Name.	Residence.	Term expires.	RETIRED.	
				Date.	Reason.
September, 1898,	George F. Jelly, M.D., <i>Herbert B. Howard, M.D.,</i>	Boston, Boston, .	September, 1908, —	—	— Resigned.
September, 1898,	<i>Charles R. Cochran,</i>	Barnstable, .	September, 1906,	September, 1906,	Term expired.
September, 1898,	<i>Edward S. Bradford,</i>	Springfield, .	—	February, 1900,	Resigned.
September, 1898,	<i>Francis B. Gardner,</i>	Brockton, .	—	February, 1902,	Resigned.
February, 1900,	<i>Albert L. Harwood,</i>	Newton Center,	September, 1905,	September, 1905,	Term expired.
January, 1902,	<i>James B. Ayer, M.D.,</i>	Boston,	September, 1907,	September, 1907,	Term expired.
December, 1902,	<i>Sevard W. Jones,</i>	Newton Highlands,	September, 1909,	Deeember, 1906,	Resigned.
September, 1905,	<i>Michael J. O'Meara, M.D.,</i>	Worcester, .	September, 1910,	—	—
October, 1906,	<i>Henry P. Field,</i>	Northampton, .	September, 1911,	—	—
January, 1907,	<i>William F. Whitemore,</i>	Boston, .	September, 1909,	—	—
September, 1907,	<i>Herbert B. Howard, M.D.,</i>	Boston, .	September, 1912,	—	—

¹ Reappointed September, 1907.

DIRECTORY OF INSTITUTIONS.

WORCESTER INSANE HOSPITAL (opened 1833) :—

Trustees: Lyman A. Ely, Worcester, chairman; George F. Blake, Worcester, secretary; T. Hovey Gage, Worcester; Miss Frances M. Lincoln, Worcester; Thomas Russell, Boston; Mrs. Sarah E. Whitin, Whitinsville; Dr. Samuel B. Woodward, Worcester.

Regular meeting, first Tuesday of each month.

Superintendent, Hosea M. Quinby, M.D.

First assistant physician, Theodore A. Hoch, M.D.

Assistant physicians, Cornelia B. J. Schorer, M.D., Edward Mellus, M.D., Ray L. Whitney, M.D., Mason W. H. Pittman, M.D., George F. Sullivan, M.D.

Assistant physician and pathologist, Freeman A. Tower, M.D.
Treasurer, Albert Wood.

Steward, Henry R. Center.

Visiting days, Wednesdays and Fridays.

TAUNTON INSANE HOSPITAL (opened 1854) :—

Trustees: Loyed E. Chamberlain, Brockton, chairman; Mrs. Elizabeth C. M. Gifford, East Boston, secretary; Nathaniel B. Borden, Fall River; James P. Francis, New Bedford; Mrs. Susan E. Learoyd, Wakefield; William C. Lovering, Taunton; Henry R. Stedman, M.D., Brookline.

Regular meeting, second Thursday of each month.

Superintendent, Arthur V. Goss, M.D.

Assistant physicians, Benjamin W. Baker, M.D., Florence H. Abbot, M.D., Horace G. Ripley, M.D., George K. Butterfield, M.D.

Assistant pathologist, Dora W. Faxon, M.D.

Treasurer, Frank W. Boynton.

Steward, Otis E. White.

Visiting days, Wednesdays and Saturdays and all legal holidays.

NORTHAMPTON STATE HOSPITAL (opened 1858):—

Trustees: Alvan Barrus, Goshen, chairman; Henry L. Williams, Northampton, secretary; F. W. Chapin, M.D., Springfield; William D. MacInnes, Pittsfield; Chas. S. Shattuck, Hatfield; Mrs. Sarah A. Woodworth, Chicopee; Miss Caroline A. Yale, Northampton.

Regular meeting, first Thursday of each month.

Superintendent, John A. Houston, M.D.

Assistant physicians, Harriet M. Wiley, M.D., Charles H. Dean, M.D., Grace E. B. Rice, M.D., Edward W. Whitney, M.D., C. Stanley Raymond, M.D.

Treasurer, Lewis F. Babbitt.

Visiting days, Tuesdays and Fridays.

DANVERS INSANE HOSPITAL (opened 1878):—

Post-office and railroad station, Hathorne (Boston & Maine).

Trustees: Samuel W. Hopkinson, Bradford, chairman; Solon Bancroft, Reading, secretary; Horace H. Atherton, East Saugus; Mrs. Ada T. Brewster, Andover; George R. Jewett, Salem; Miss Mary Ward Nichols, Danvers; Orville F. Rogers, M.D., Boston.

Regular meeting, second Friday of each month.

Superintendent, Chas. W. Page, M.D.

Senior assistant physician, Henry A. Cotton, M.D.

Assistant physicians, Earl E. Besse, M.D., Charles B. Sullivan, M.D., Anna H. Peabody, M.D., John J. Walker, M.D., Gordon T. Brown, M.D.

Assistant physician and pathologist, Elmer E. Southard, M.D.

Treasurer, Warren A. Merrill.

Steward, John N. Lacey.

Visiting days, Mondays and Wednesdays.

WESTBOROUGH INSANE HOSPITAL (opened 1886):—

Trustees: John L. Coffin, M.D., Northborough, chairman; Miss Eliza C. Durfee, Fall River, secretary; William Avery Cary, Boston; Benjamin W. Childs, Worcester; George B. Dewson, Cohasset; Lewis R. Speare, Newton; Miss Sarah B. Williams, Taunton.

Regular meeting, first Thursday of each month.

Superintendent, George S. Adams, M.D.

Assistant superintendent, Henry I. Klopp, M.D.

WESTBOROUGH INSANE HOSPITAL (opened 1886) — *Concluded.*

Assistant physicians, E. Ray Buhrman, M.D., William W. Coles, M.D., Ruth B. Coles, M.D., M. M. Jordan, M.D., Mary Johnson, M.D.

Pathologist, Solomon C. Fuller, M.D.

Treasurer, H. L. Davenport.

Steward, Melville L. Stacy.

Visiting days, Tuesdays and Saturdays.

WORCESTER INSANE ASYLUM (opened 1877) :—

Trustees: trustees of Worcester Insane Hospital.

Superintendent, Ernest V. Scribner, M.D.

Assistant physicians, H. Louis Stick, M.D., Arthur E. Pat-trell, M.D., William T. Hanson, M.D., Charles H. Wheeler, M.D.

Pathologist, Frederick H. Baker, M.D.

Treasurer, Albert Wood.

Visiting days, every day except Sunday.

MEDFIELD INSANE ASYLUM (opened 1896) :—

Post-office, Harding; railroad station, Medfield Junction (New York, New Haven & Hartford).

Trustees: Ira G. Hersey, Hingham, chairman; Mrs. Sarah Rand, Newton Center, secretary; William O. Blaney, Bos-ton; John Duff, Boston; F. B. Lund, M.D., Boston; Wm. H. Morrison, Brockton; Mrs. Nellie Palmer, South Fram-ingham.

Regular meeting, first Thursday following the first Tuesday of each month.

Superintendent, Edward French, M.D.

Assistant physicians, Lewis M. Walker, M.D., Ralph S. Wilder, M.D., Helen T. Cleaves, M.D., George A. Troxell, M.D.

Treasurer, Chas. C. Blaney.

Steward, F. H. Gross.

Visiting days, Tuesdays and Fridays.

STATE COLONY FOR THE INSANE, GARDNER (opened 1902) :—

Post-office, Gardner; railroad station, East Gardner.

Trustees: Edmund A. Whitman, Cambridge, chairman; Mrs. Amie H. Coes, Worcester, secretary; William H. Baker, M.D., Lynn; John G. Blake, M.D., Boston; George N. Harwood, Barre; Mrs. Alice Miller Spring, Fitchburg; Wilbur F. Whitney, Ashburnham.

STATE COLONY FOR THE INSANE, GARDNER (opened 1902) — *Concluded.*

Regular meeting, last Thursday of each month.

Superintendent and treasurer, Chas. E. Thompson, M.D.

Assistant superintendent, Geo. A. Pierce, M.D.

Assistant physician, Wm. F. Farmer, M.D.

Visiting days, every day except Sundays and holidays, from 10 A.M. to 4 P.M.

INSANE WARDS, STATE HOSPITAL (opened 1866) : —

Post-office, Tewksbury; railroad stations, Tewksbury (Western Division, Boston & Maine), Tewksbury Junction and Salem Junction (Southern Division, Boston & Maine).

Trustees: Joseph A. Smart, Andover, chairman; Rev. Payson W. Lyman, Fall River, secretary; Mrs. Sarah D. Fiske, Malden; Leonard Huntress, M.D., Lowell; Emery M. Low, Brockton; Mrs. Anna F. Prescott, Boston; John B. Tivnan, Salem.

Regular meeting, usually during last week of month, alternately at State Hospital and State Farm.

Superintendent, John H. Nichols, M.D.

Assistant superintendent and physician, Ernest B. Emerson, M.D.

First assistant physician, Howard F. Holmes, M.D.

Assistant physicians, Hannah Lowell Emerson, M.D., Walter C. Kenney, M.D., Carl J. Hedin, M.D., Alfred J. Roach, M.D., Burt F. Howard, M.D.

Pathologist, Samuel R. Haythorn, M.D.

Visiting days, every day except Sundays and holidays, from 10 A.M. to 4 P.M.

STATE ASYLUM FOR INSANE CRIMINALS, STATE FARM (opened 1886, 1895) : —

Post-office, State Farm; railroad station, Titicut (New York, New Haven & Hartford).

Trustees: trustees of State Hospital and State Farm.

Medical director, Chas. A. Drew, M.D.

Assistant physicians, Alfred Elliott, M.D., Leonard A. Baker, M.D.

Visiting days, every day except Sundays and holidays.

MASSACHUSETTS HOSPITAL FOR EPILEPTICS (opened 1898) : —

Post-office and railroad station, Palmer (Boston & Albany).

MASSACHUSETTS HOSPITAL FOR EPILEPTICS (opened 1898) — *Concluded.*

Trustees: William N. Bullard, M.D., Boston, chairman; Charles A. Clough, Groton, secretary; Winford N. Caldwell, Springfield; Henry P. Jaques, M.D., Lenox; Walter W. Scofield, M.D., Dalton; Mrs. Mabel W. Stedman, Brookline; Mrs. Mary P. Townsley, Springfield.

Regular meeting, first Thursday of each month.

Superintendent, Everett Flood, M.D.

Assistant physicians, Morgan B. Hodskins, M.D., Edward A. Kennedy, M.D., Alden V. Cooper, M.D., Melvin E. Cowen, M.D.

Treasurer, Walter E. Hatch.

Steward, Charles F. Simonds.

Visiting days, Tuesdays and Fridays.

FOXBOROUGH STATE HOSPITAL (opened 1893) :—

Trustees: Robert A. Woods, Boston, chairman; William H. Prescott, Boston, secretary; Timothy J. Foley, Worcester; Frank L. Locke, Malden; Edwin Mulready, Rockland; W. Rodman Peabody, Cambridge; James H. Perkins, Milton.

Regular meeting, first Wednesday of each month.

Superintendent, Chas. E. Woodbury, M.D.

Senior assistant physician, Clarence J. Bell, M.D.

Junior assistant physician, Leslie E. Coffin, M.D.

Visiting days, Tuesdays, Fridays and all holidays.

MASSACHUSETTS SCHOOL FOR THE FEEBLE-MINDED (opened 1848) :—

Post-office and railroad station, Waverley (Boston & Maine).

Trustees appointed by the Governor: William W. Swan, Brookline, president; Francis J. Barnes, M.D., Cambridge; Mrs. Luann L. Brackett, Newton; Thomas W. Davis, Boston; Felix Gatineau, Southbridge; Charles S. Hamlin, Boston;

Trustees appointed by the corporation: Frank G. Wheatley, M.D., North Abington, vice-president; Chas. E. Ware, Fitchburg, secretary; Chas. Francis Adams, 2d, Concord; Francis Bartlett, Boston; Frederick P. Fish, Brookline; Joseph B. Warner, Boston.

Quarterly meeting, second Thursday of October, January, April and July.

MASSACHUSETTS SCHOOL FOR THE FEEBLE-MINDED (opened 1848)
— *Concluded.*

Superintendent, Walter E. Fernald, M.D.

Assistant physicians, Joseph H. Ladd, M.D., G. S. Bliss, M.D.,
Annie M. Wallace, M.D., Edith Woodill, M.D.

Treasurer, Richard C. Humphreys.

Visiting days, Wednesday, Thursday and Saturday afternoons.

WRENTHAM STATE SCHOOL (opened 1907) : —

Post-office and railroad station, Wrentham.

Trustees: Albert L. Harwood, Newton, chairman; Ellerton
James, Nahant, secretary; John J. Connor, Peabody; Wal-
ter Channing, Brookline; Susanna W. Berry, Lynn;
Herbert Parsons, Greenfield; Mary Stewart Scott, Worcester.

Regular meeting, second Thursday of each month.

Superintendent and treasurer, George L. Wallace, M.D.

Visiting days, every day.

THE HOSPITAL COTTAGES FOR CHILDREN, BALDWINVILLE (opened
1882) : —

President, H. S. Morley, Baldwinville; clerk, Robert N.
Wallis, Fitchburg.

Trustees appointed by the Governor: David H. Coolidge, Bos-
ton; Jenness K. Dexter, Springfield; Mrs. William W.
Doherty, Boston; Mrs. K. M. Gilmore, Boston; Arthur H.
Lowc, Fitchburg; H. S. Morley, Baldwinville.

Trustees appointed by the corporation: John M. Bemis, M.D.,
Worcester; Mrs. J. B. Case, Boston; Mrs. W. S. Clark,
Worcester; Homer Gage, M.D., Worcester; Mrs. Edward L.
Greene, Lancaster; Mrs. George Heywood, Gardner; Rev.
J. S. Lemon, Gardner; Mrs. Winslow S. Lincoln, Worces-
ter; Mrs. Geo. T. Plunkett, Hinsdale; F. W. Russell, M.D.,
Winchendon; F. P. Stone, Otter River; Gilman Waite,
Baldwinville; Robert N. Wallis, Fitchburg; Mrs. Sarah E.
Whitin, Whitinsville.

Quarterly meeting, second Wednesday of October, January,
April and July.

Superintendent, Hartstein W. Page, M.D.

Assistant physician, L. Maude Warren, M.D.

Treasurer, George L. Clark.

Visiting days, every day except Sundays.

BOSTON INSANE HOSPITAL (opened 1839) :—

Women's department: post-office, Dorchester Center; railroad station, Forest Hills. Men's department: post-office, Mattapan; railroad station, Forest Hills (New York, New Haven & Hartford).

Trustees: Michael J. Jordan, Boston, chairman; Mrs. Agnes C. Bulger, Boston, secretary; C. James Connolly, Boston; Charles L. Cooney, Boston; Michael S. Morton, Boston; Mrs. Mary T. Morrison, Boston; George A. Sanderson, Boston.

Regular meeting, at 64 Pemberton Square, Boston, second Thursday of each month.

Superintendent, William Noyes, M.D.

Assistant physicians, S. W. Crittenden, M.D., Geo. H. Maxfield, M.D., Mary E. Gill, M.D., F. X. Corr, M.D.

Steward, William E. Elton.

Visiting day, Wednesday, 2 to 4 p.m.

PRIVATE INSTITUTIONS.

MCLEAN HOSPITAL (opened 1818) :—

Department of Massachusetts General Hospital Corporation; post-office and railroad station, Waverley (Boston & Maine).

President, Charles H. Dalton, Boston; treasurer, Franklin Haven, Boston; secretary, C. H. W. Foster, Needham.

Trustees appointed by the Governor: Henry S. Howe, Boston; Henry S. Hunnewell, Wellesley; David P. Kimball, Boston; Charles P. Greenough, Boston.

Trustees appointed by the corporation: Henry P. Walcott, M.D., Boston, chairman; Francis H. Appleton, Boston; Francis Blake, Auburndale; C. H. W. Foster, Needham; Nathaniel Thayer, Boston; George Wigglesworth, Boston; Moses Williams, Boston; Francis L. Higginson, Boston.

Regular meeting, usually at Merchants' National Bank of Boston, on Friday, at intervals of two weeks, beginning sixteen days after first Wednesday in February.

Superintendent, George T. Tuttle, M.D.

First assistant physician, E. Stanley Abbot, M.D.

Second assistant physician, Guy G. Fernald, M.D.

Assistant physician, Frederick H. Packard, M.D.

Assistant in pathological chemistry, Otto Folin, Ph.D.

Assistant in pathological psychology, F. Lyman Wells, Ph.D.

MCLEAN HOSPITAL (opened 1818) — *Concluded.*

Junior assistant physicians, Ralph C. Kell, M.D., Frederic B.

M. Cady, M.D., Charles C. Erdmann, A.B.

Visiting days, Wednesdays and Saturdays.

BOURNEWOOD, Henry R. Stedman, M.D., South Street, Brookline.

Railroad station, Bellevue (Dedham Division, New York, New Haven & Hartford). Fifteen minutes' walk. Carriage by previous arrangement.

THE HIGHLANDS, Frederick W. Russell, M.D., Winchendon (Fitchburg). Carriage.

CHANNING SANITARIUM. Walter Channing, M.D., Brookline.

Railroad station, Reservoir (Boston & Albany). Carriage. Or Chestnut Hill street car to Chestnut Hill Avenue.

PRIVATE HOSPITAL, Eben C. Norton, M.D. Post-office, Norwood; railroad station, Norwood Central (New York, New Haven & Hartford).

PINE TERRACE, W. F. Robie, M.D., Baldwinville.

HERBERT HALL, John Merrick Bemis, M.D., Salisbury Street, Worcester. Carriage.

NEWTON NERVINE AND SANATORIUM, N. Emmons Paine, M.D., West Newton. Carriage. Or Newton Boulevard street car to Washington Street.

WELLESLEY NERVINE, Edward H. Wiswall, M.D., Washington Street, Wellesley.

CUTTER RETREAT, William F. Heald, M.D., Pepperell. Carriage.

LOCUST GROVE ASYLUM, Miss Alice R. Cooke; medical director, George E. White, M.D.; Sandwich. Carriage.

DR. RING'S SANATORIUM, Allan Mott Ring, M.D., Arlington Heights. Carriage.

FRAMINGHAM NERVINE, Ellen L. Keith, M.D., Winter Street, Framingham.

PRIVATE HOSPITAL, J. F. Edgerly, M.D., 1 Mt. Vernon Terrace,
Newtonville.

HIGHLAND HALL, Samuel L. Eaton, M.D., 340 Lake Avenue,
Newton Highlands.

DR. REEVES' NERVINE, Harriet E. Reeves, M.D., 23 Boston Avenue,
West Medford.

PRIVATE HOSPITAL, George B. Coon, M.D., East Walpole.

THE WHEELER SANITARIUM, Mrs. Maria H. Paul, 32 Copeland
Street, Roxbury. Elevated to Dudley Street; Warren street
ear.

ARLINGTON HEALTH RESORT, Arthur H. Ring, M.D., Arlington
Heights. Carriage.

ELM HILL, PRIVATE SCHOOL AND HOME FOR THE FEEBLE-MINDED,
George A. Brown, M.D., Barre (Massachusetts Central
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